

## **CREDIT APPLICATION**

Thank you for choosing Sunrise Digital. Please complete all information below and return to your Sunrise Digital representative.

Date of Application:	Address:	
Date of Application:	City/State/Zip	
Name of Business:	Telephone:	
DBA (if applicable):	Fax:	
	Account #: (	Contact:
Address:	2 Company:	
City/State/Zip	2. Company:	
	City/State/Zip	
Telephone:	Telephone:	
Fax:	Fax:	
A/P Name:	Account #:(	
A/P Phone: A/P Fax:	3. Company:	
A/P Email:	Address:	
	City/State/Zip	
Tax ID or SS# (if Sole Proprietor):	Telephone:	
Business License #:	Fax:	
Year Founded:	Account #:(	Contact:
	BANK REFERENCE:	
Annual Sales:	Bank Name:	
No. of Employees:	Address:	
CREDIT CARD GUARANTEE (REQUIRED):  Credit card information will be kept on file and will not be charged unless invoices are past-due and we've exhausted all other payment	City/State/Zip	
options.	Telephone:	
Credit Card Number:	Fax:	
Expiration Date: Billing Zip Code:	Contact Name:	
	Account #:	
Authorized Signature:	Account Type: O Savir	ngs O Checking

TRADE REFERENCES:

1. Company: \_\_\_\_\_