

North American Camera, LLC

Credit Application

338 N. Milwaukee St. Suite 307, Milw. WI. 53202 414.765.1111 Fax 414.765.1125

rentals@nacamera.com

General Information:

Name of Firm or Individual		Telephone	
Address		Fax	
City	State	Zip	E-mail Address

Ownership:

Date Business Started: _____ [] Individual				[] Partnership	[] Corporation
Name of Principal #1		Title	Social Security #		
Home Address		Phone			
Name of Principal #2		Social Security #			
Home Address		Phone			

Business Information:

What is the nature of your company's business?	

Resale Cert. ID #:	_____ (Attach Certificate)
Non-For Profit ID #:	_____ (Attach Certificate)

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Credit Application pt. 2

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Address Clarification:

Billing Address: [] Same as Above	Shipping Address [] Same as Above
_____	_____
_____	_____
_____	_____
Contact: _____	Contact: _____

Finance:

Bank: _____ Contact: _____
City: _____ Account # _____
Phone: (____) _____ Fax: (____) _____

Trade Credit References:

Business: _____ Contact: _____
Phone: (____) _____ Fax: (____) _____ Acct: _____
Business: _____ Contact: _____
Phone: (____) _____ Fax: (____) _____ Acct: _____
Business: _____ Contact: _____
Phone: (____) _____ Fax: (____) _____ Acct: _____

Shipping Information:

FedEx Account #: _____ UPS Account #: _____

Credit Card Information:

Name on Card: _____
Credit Card Number: _____
Expiration Date: _____
Full Billing Address of Card: _____
3-Digit Security Code: _____

We certify that the information above is correct and authorize the above named banks and/or trade references to disclose any information on credit worthiness. We fully understand your credit terms and agree to the proper payment in consideration of extended credit.

Signed & Dated _____ Title _____