|  |
| --- |
| **Holland Industrial: Credit Approval Request Form** |
| Top of Form

|  |  |
| --- | --- |
| **Date:** |  |
| **Customer Name:** |  |
| **Mailing Address:** |  |
| **Shipping Address(if different):** |  |
| **City:** |  |
| **State:** |  |
| **Zip:** |  |
| **Telephone No.:** |  |
| **Fax No.:** |  |
| **Contact Name: Purchasing:** |  |
| **Contact Name: Accounting:** |  |
| **No. of Years in Business:** |  |
| **State ResaleTax ID #** | **Please e-mail us a copy of your State Tax Resale ID Form if you plan to resell items purchased from us** |
| **Federal Tax ID #:** |  |

***Three Credit References & Bank Reference Account Numbers (Include TelNo & Fax No-Address required if no fax number*)**

|  |  |
| --- | --- |
| ***1*** |  |
| ***2*** |  |
| ***3*** |  |
| ***Bank:*** |  |
| ***Contact Person:*** |  |

Bottom of Form |

Please provide the above info, copy and paste. E-mail to donna@hollandindustrial.com