



CREDIT APPLICATION

2220 STICKNEY POINT ROAD
UNIT 537
SARASOTA, FL 34231
(941) 753-5131
OFFICE@PERMITBOXCOMPANY.COM

THIS FORM WILL INITIATE YOUR REQUEST FOR OPEN CREDIT. PLEASE FILL OUT THIS FORM COMPLETELY AND RETURN IT TO PERMIT BOX COMPANY. ALL INFORMATION FURNISHED WILL BE HELD IN STRICT CONFIDENCE AND USED ONLY IN CONNECTION WITH THE EXTENSION OF CREDIT TO YOUR ACCOUNT.

COMPANY INFORMATION

AMOUNT OF CREDIT YOU WISH TO ESTABLISH:

COMPANY NAME:

CONTACT PERSON: EMAIL:

BILL TO ADDRESS:

SHIP TO ADDRESS:

DIVISION OF: TELEPHONE #

STATE OF INCORPORATION: DATE ESTABLISHED:

CIRCLE ONE: PROPRIETORSHIP PARTNERSHIP LLC CORPORATION

SALES TAX CERTIFICATE#: (PLEASE ATTACH COPY) FEDERAL TAX ID#: (PLEASE ATTACH COPY)

PRINCIPALS & OFFICERS	TITLE	SOCIAL SECURITY#

CREDIT REFERENCES

COMPANY:	CONTACT:	PHONE#
ADDRESS:		EMAIL:
COMPANY:	CONTACT:	PHONE#
ADDRESS:		EMAIL:
COMPANY:	CONTACT:	PHONE#
ADDRESS:		EMAIL:
BANK REFERENCES		
BANK NAME:	ADDRESS:	PHONE#
CONTACT PERSON:	EMAIL:	ACCOUNT#:
BANK NAME:	ADDRESS:	PHONE#
CONTACT PERSON:	EMAIL:	ACCOUNT#:

AGREEMENT:

THE INFORMATION YOU HAVE PROVIDED SHALL BE DEEMED CONFIDENTIAL, EXCEPT TO THE EXTENT REQUIRED TO VERIFY THE INFORMATION CONTAINED HEREIN. BY SIGNING BELOW, YOU AGREE TO BE INDIVIDUALLY, TOGETHER WITH ALL SUCCESSORS AND ASSIGNS AND PROMISE THE PROMPT PAYMENT OF ALL AMOUNTS OWING ON THE ACCOUNT THAT MAY NOW OR HEREAFTER BECOME DUE AND PAYABLE TO PERMIT BOX COMPANY. ALL PAYMENTS WILL BE MADE TO PERMIT BOX COMPANY 2220 STICKNEY POINT ROAD UNIT 537 SARASOTA, FL. 34231 WHICH IS THE AGREED SITE OF ANY COLLECTION ACTION THAT MAY BE BROUGHT ON THIS ACCOUNT. IN THE EVENT OF SUCH ACTION, YOU AGREE TO PAY ALL SERVICE CHARGES, COLLECTION COST, COURT COSTS, AND REASONABLE ATTORNEY FEES. IF YOU OBJECT TO ANY INVOICE CHARGE OR THE QUALITY OF ANY PRODUCT YOU MUST NOTIFY THE PERMIT BOX COMPANY IN WRITING WITHIN 10 DAYS OF THE DATE OF THE INVOICE, STATEMENT OF ACCOUNT OR DELIVERY AT THE ADDRESS SPECIFIED ABOVE.

NAME OF FIRM OR CORPORATION _____

SIGNATURE _____ TITLE _____

DATED THIS _____ DAY OF _____, 20____.

CITY _____ COUNTY _____ STATE _____.