



www.retrousa.net

Business Contact Information

APPLICATION FOR CREDIT

Fax back completed credit application - FAX (952)435-9891

Business Trade Name, if any.

Federal ID or Social Security# [ ] Corporation [ ] Partnership [ ] Individual

Legal Name

Business Address City State Zip

Phone Fax Email

Owner or Principal Officer SSN#

Home Address City State Zip

Home Phone

Nature of Business Year Started

Annual Sales (12 mos.) Fin. Statement - [ ] Attached [ ] Will Be Mailed

What Product Line are you most interested in?

Est. Date of First Order Amount of First Order Est. Annual Dollar Volume

Credit Line Being Required

CREDIT REFERENCES: NOTE! please include fax numbers for PROMPT PROCESSING

Bank Name Bank Address City State Zip

Account Phone Fax

I hereby authorize the above named bank to release this information to Retro USA.

Any other liens, i.e. taxes or judgments pending?  Yes  No

Any lawsuits pending?  Yes  No

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

OTHER References (Minimum of 3 required)

Company Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Company Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Company Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Company Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Accounts Receivable & Inventory Secured Loan. Yes No

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