

PRECISION CHEMICAL & PAPER SUPPLY, INC
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706-279-1658 FAX
Email: orderdesk@precisionchemicalandpaper.com

CREDIT APPLICATION

Date: _____

We are interested in establishing an open account with your organization.

Name of Business: _____

Mailing Address: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Fax Number _____

Established: _____ years.

A/P Contact: _____ Email _____ Phone: _____

Type of Organization: Individual Partnership Corporation

Principals:

Name

Title:

Suppliers: (to use as credit references)

Please list local references if possible

1. _____

2. _____

3. _____

4. _____

Name and Address of Bank:

Signed by: _____ Title _____