

# Martin's Metal Fabrication & Welding, Inc.

PO Box 1855, Vacaville, CA 95696-1855  
(707) 678-4117 FAX (707) 678-0251  
CA Lic. 595287

## Credit Application

Business Name \_\_\_\_\_

Business Address (mailing) \_\_\_\_\_

\_\_\_\_\_

Business Address (physical) \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_ AP Contact Name \_\_\_\_\_

Ownership of Business: \_\_\_\_\_ Corporation (State of Incorporation) \_\_\_\_\_ Partnership

\_\_\_\_\_ Sole Proprietor \_\_\_\_\_ Other (explain) \_\_\_\_\_

Type of Business \_\_\_\_\_

Year Established \_\_\_\_\_ At Present Location Since \_\_\_\_\_

Bank Name & Branch Location \_\_\_\_\_

Bank Contact Name and Telephone Number \_\_\_\_\_

Account No. \_\_\_\_\_ Checking or Saving? \_\_\_\_\_

### Trade References:

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address & Contact \_\_\_\_\_

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address & Contact \_\_\_\_\_

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address & Contact \_\_\_\_\_

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address & Contact \_\_\_\_\_

**The signature below must and will be construed to be from a duly authorized representative of the applicant, and shall act as an authorization for release of Bank and Trade-Reference information.**

**I (we) certify that the above information is true and correct, and that we can and will comply with Martin's Metal Fabrication's terms: Net 10 days unless otherwise indicated in writing. A 2% finance charge per month on all past due balances may be assessed.**

Date \_\_\_\_\_ (signature ) \_\_\_\_\_

\_\_\_\_\_  
(printed name and title)

**If your company is purchasing goods for resale, please attach resale card. All customers without valid resale cards on file will be charged applicable California sales taxes.**