## **CREDIT APPLICATION**

AIR TECH SALES

1830 Vernon Street, Suite #2 Roseville, CA 95678

Phone: (916) 969-6730 Fax: (916) 782-7550

Date					
Name of Business					
Mailing Address		City	State	Zip	
Street Address		City	State	Zip	
Business Phone		_Fax #			
Indicate if sales tax will t	pe charged to your purchases. Yes	_ No If No, Cor	mplete the following	ng page *.	
	CONTRACTORS I	ICENSE INFORMAT	TION		
License No	Original Class	Original Class Supplemental Class poration ( ) Partnership ( ) Sole Proprietor ( ) Indivi			
Type of Business: (	) Corporation ( ) Partnership	( ) Sole Proprietor	( ) Individua		
PRIN	NCIPAL OWNERS, OFFICERS	s, STOCKHOLDERS	and/or DIRECT	ORS	
Name	Title	_   Name		_ Title	
Home Address	State Zip	Home Address			
City	State Zip	_   City	State	Zip	
	BANK F	REFERENCE			
Bank	Branch	Phone	Acc	ct#	
	Branch				
	TRADE F	REFERENCES			
Name	Address			State	
	Ph				
Name	Address	Citv		State	
	P				
	Address				
	Ph				
	m this application is made, or any creation				
	r person pertaining to applicant's cred		onto or other data t	blanca nom	
prevailing party in sur suit, reasonable attor has commenced will	wsuit filed in relation to this account to suit shall be entitled to recover the ney's fees and expert witness fees. As be obligated to pay the costs of the spotherough the time of payment.	principal amount due with buyer who wants to pay	h interest, at the leg a past due balance	gal rate, the cost of the in full after a lawsuit	
3. The following signatu	re serves as acknowledgement of an	d consent to the terms &	conditions stated or	n this credit application	
Signature		itle		Date	
		TitleDate (Type or print name of person signing)			

<sup>\*</sup> Next Page is for <u>Declaration of Tax Exemption</u>. If you need this page and did not receive it, please call and let us know.