

CREDIT APPLICATION FORM

This credit application is to be completed (preferably type written) by an authorized individual of the business submitting the application. All applications should be accompanied by company and affiliates latest financial statement.

Company Information

Legal Business Name _____ **Trade Name** _____

Date Established/Incorporated _____ **In Business Since** _____ **Reg/DNB#** _____

Legal Address: _____

Postal/Zip Code _____ **Country** _____ **City/State** _____

Point of Presence (if different from above) _____

Physical Address: _____

Postal/Zip Code _____ **Country** _____ **City/State** _____

Web Address _____ **Phone** _____ **Fax** _____

Type of Business (Pls. check) Corporation Partnership State-owned
 Proprietorship **Others, specify** _____

Brief Description of Business _____

of Employees _____ **Do you own your Building** _____ **Trading under the Laws of (Country Name)** _____

Principals / Owners / Officers

Name	Designation	Nationality	Email Address	Phone	Fax
1)					
2)					
3)					

Parent Company Name _____ **Does Parent Company Guarantee Debts?** (Y/N) _____

Complete Legal Address: _____

Contact Person _____ **Phone** _____ **Fax** _____ **Email** _____

Subsidiaries/Affiliates/Divisions

Company/Division Name	Legal Address	Contact Details
1)		
2)		
3)		

Credit amount requested (USD\$) _____ **anticipated monthly / semi-monthly / weekly usage** _____

Annual Sales

Year 1	Year 2	Year 3

Net Working Capital

Year 1	Year 2	Year 3

Trading Currency _____

Paid-up Capital / Owner's Equity _____

Bank References

Bank Name & Branch	Account No.	Complete Address	Phone/ Email	Fax
1)				
2)				

Carrier / Trade References

Company Name	Type of Business	City & Country	Contact Person & Title	Phone/Fax/Email
1)				
2)				
3)				

Customer Authorization

I authorize Breezecom FZC, and its designees to conduct a routine credit check in connection with my application of service. I understand that the information provided will remain the property of Breezecom, whether or not it is approved, and will be held

Applicant Name _____ **Designation** _____ **Signature:** _____ **Date:** _____

Note for Mandatory attachments:

In Case of Company last three years audited financial statements OR In case of an Individual bank statements for the last six months is required