



APPLICATION FOR CREDIT

ATTN TO:

New Equipment Sales Replacement Parts Service
717-757-5085 717-718-1718 717-718-4245

Fax#: _____

Legal Company Name: _____

Mailing Address: _____

Street Address: _____

Type of Business: Corporation Partnership Sole Proprietorship Other _____

Telephone Number: _____ Fax Number: _____

PRINCIPALS / OWNERS

Full Name _____ Position _____

Full Name _____ Position _____

Full Name _____ Position _____

BANK REFERENCE

Bank _____ Address _____

Account Number _____ City, State, Zip _____

Telephone Number _____ Fax Number _____

TRADE REFERENCES

Name _____ Address _____

Telephone Number _____ City _____

Fax Number _____ State, Zip _____

Name _____ Address _____

Telephone Number _____ City _____

Fax Number _____ State, Zip _____

Name _____ Address _____

Telephone Number _____ City _____

Fax Number _____ State, Zip _____

I hereby certify the above information to be correct and supplied on my behalf or on behalf of the organization named above intending that PoolPak LLC shall rely on it in considering this application for credit in respect of goods or services to be supplied. PoolPak LLC may request an updated credit application if needed. Permission is hereby granted to discuss the organization account with the bank and trade sources before credit is approved.

Authorized Signature _____ Print Name _____

Title _____ Date _____