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biz@gormanindustries.com CRS#01-078382-002

Application for Credit

Company Name:	o4 or email <u>Sara@gorm</u>	Date:
Accounts Payable Contact:		PO Required: Yes No
BillingAddress:		Zip Code:
Addrocc:		Zin Codo:
E-Mail Address:		
Check one of the followin Corporation Names and Titles of Office	g: Partnership ers or Partners:	Proprietorship
Bank Information:	Account #:	
Contractor's License #: Gas License #: EPA Certification #: Credit References: (Must I		cation to be processed. <i>Please Include Address, Phone Number & FAX Number</i>)
NOTE: These must be vendors who will Grainger requires an account number.	give credit references on your firm.	Credit card companies, banks, freight companies and retail outlets such as Sears will not give a reference.
1)		2)
Ph:		Ph:
Ph:		Ph: