

**The Ziegenfelder Company, Inc.
Budget Saver® Brand**

P.O. Box 6645
87 18th Street
Wheeling, WV 26003
Tel: 304-232-6360
Fax: 304-232-6368

Application for Credit

Bill To

Company name: _____
Legal name: _____
Address: _____
Phone number: _____
Fax number: _____
Email: _____

Ship To

Company name: _____
Address: _____
Phone number: _____
Fax number: _____

General Business Information

1. Are you listed with D&B? _____ If yes, DUNS # and rating _____
2. Is your business seasonal? _____ If yes, please describe _____
3. How many years have you been in business? ____ Date of incorporation _____
4. Check the type of business. Retailer ___ Wholesaler ___ Distributor ___ Other ___
5. How many stores do you own/operate and how many distribution centers? _____
6. Has the company ever filed for bankruptcy? _____
7. Legal entity status. C-Corporation ___ S-Corporation ___ Partnership ___ Other ___
8. EIN: _____
9. Estimated annual purchases in cases _____

Bank Information

Name of bank: _____
Account number: _____
Contact person/e-mail address: _____
Address: _____
Telephone: _____
Fax: _____
Years with bank: _____

Trade References

Company name: _____
Contact person: _____
Address: _____
Phone: _____
Fax: _____

Company name: _____
Contact person: _____
Address: _____
Phone: _____
Fax: _____

Company name: _____
Contact person: _____
Address: _____
Phone: _____
Fax: _____

Company name: _____
Contact person: _____
Address: _____
Phone: _____
Fax: _____

The applicant hereby authorizes the bank to release to the Ziegenfelder Company, Inc. all information requested. It is understood that all information will be kept confidential by the Ziegenfelder Company, Inc. All invoices will be paid within the terms granted and any amounts considered past due will carry a finance charge of 1.5% per month, 18% per annum.

Authorized signature _____ Title _____

Print name _____ Date _____