



Credit Application

All lines on this application must be completed in full. Copies of pertinent documents must accompany the application when submitted to begin processing procedure.

• **BUSINESS TYPE:**

Sole Proprietorship Partnership Corporation Contractor

Company Name: _____ Yrs in Business _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email : _____ Web Site: _____

• **CORPORATE OFFICERS:**

Name: _____ Name: _____

Title: _____ Title: _____

Address: _____ Address: _____

Phone: _____ Phone: _____

• **BANK REFERENCES:**

Bank Name: _____ Acct #: _____

Address: _____ City: _____

State: _____ Zip / Postal Code: _____

Phone: _____ Contact: _____

Fax: _____ Email: _____

Bank Release / Account Information Release

I authorize _____ to release our Business account rating to

(Your Bank)

DrillingWorld.

Authorized Signature

Date

Contractor's License# _____ State: _____

Bond Type: _____

Bond Company: _____ Expiration Date: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Contact: _____

Federal Tax ID: _____ Resale Certificate: _____

Please provide copy of all Resale Certificates, Contractor's License's and Insurance Bonds.

TRADE REFERENCES:

Name: _____ Acct #: _____

Address: _____ City: _____

State: _____ Zip / Postal Code: _____

Phone: _____ Contact: _____

Fax: _____ Email: _____

Name: _____ Acct #: _____

Address: _____ City: _____

State: _____ Zip / Postal Code: _____

Phone: _____ Contact: _____

Fax: _____ Email: _____

Name: _____ Acct #: _____

Address: _____ City: _____

State: _____ Zip / Postal Code: _____

Phone: _____ Contact: _____

Fax: _____ Email: _____

The above information is herewith submitted for the purpose of opening a LINE OF CREDIT and I do hereby certify this information to be true and accept Terms of 2% 10, Net30 days.

Authorized Signature: _____

Title: _____ Date: _____

1458 Mariani Drive ~ Tracy, CA 95376

800-331-9988 ~ 209-855-8300 (phone) ~ 209-839-9897 (fax)