

Kejriwal Paper USA, Ltd.  
**CREDIT APPLICATION**

**BUSINESS CONTACT INFORMATION**

Title:

Company name:

Phone:

Fax:

E-mail:

Registered fictitious name aka DBA name, if any:

Registered company address:

City:

State:

Zip Code:

**Business and Credit Information**

Type or Nature of the Business:

Date business commenced or was incorporated:

Dun and Bradstreet Number:

Annual Sales:

Federal Tax ID No.

Sales Tax Exempt

P.O. Required?

Yes  No

Yes  No

If yes, then attach the certificate

Type of ownership

Sole proprietorship:

Partnership:

Corporation:

Other:

A Guarantee/Principal's information might end up being required.

Name of Guarantee #1:

Title:

% of Ownership

Social Security Number:

Residential address:

City:

State:

Zip Code:

Name of Guarantee #2:

Title:

% of Ownership

Social Security Number:

Residential address:

City:

State:

ZIP Code:

If the business is a public corporation then the following will be required:

Name of Officer#1:

Title:

Name of Officer#2:

Title:

**Bank References**

Bank Name:

Bank Address:

City:

State:

Zip Code:

Telephone:

Fax:

Email:

Checking Account No.

Saving Account No.

**BUSINESS/TRADE REFERENCES**

Company name:

|   |      |         |           |
|---|------|---------|-----------|
| Address:  |      |         |           |
| City:   |      | State:  | ZIP Code: |
| Phone:  | Fax: | E-mail: |           |
| Company name:   |      |         |           |
| Address:  |      |         |           |
| City:   |      | State:  | ZIP Code: |
| Phone:  | Fax: | E-mail: |           |
| Company name:   |      |         |           |
| Address:  |      |         |           |
| City:   |      | State:  | ZIP Code: |
| Phone:  | Fax: | E-mail: |           |
| <b>AGREEMENT</b>  |      |         |           |
| <ol style="list-style-type: none"> <li>1. All invoices are to be paid 30 days or less from the date of the invoice if credit is approved. If unapproved, then alternate payment methods, such as advance, letter of credit or other may be required.</li> <li>2. Claims arising from invoices must be made within seven working days.</li> <li>3. By signing and submitting this application, you authorize Kerjriwal Paper USA Ltd., to make inquiries into the banking and business/trade references that you have supplied.</li> </ol> |      |         |           |
|   |      |         |           |
| Signature:  |      | Title:  | Date:     |
| <b>Guarantee's/Principal's Signature</b>  |      |         |           |
| Signature:  |      | Title:  | Date:     |