

**FINANCIAL SERVICES  
CREDIT APPLICATION  
(SHORT FORM)**

Name of Business \_\_\_\_\_ Type (Circle One ): Sole P / Partnership / Corp

Business Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Email Address \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

County \_\_\_\_\_ Years in Business \_\_\_\_\_ Federal ID # \_\_\_\_\_ Dun&Brad # \_\_\_\_\_

Owner Name / Authorized Signer (Please Print) \_\_\_\_\_

Social Security \_\_\_\_\_

Home Owner or Renter (Circle One) \_\_\_\_\_ Number of Years at Current Address \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone # \_\_\_\_\_ Cell # \_\_\_\_\_ Pager # \_\_\_\_\_

Nearest Relative (Required): \_\_\_\_\_ Relation \_\_\_\_\_ Phone # \_\_\_\_\_

Primary Bank Name \_\_\_\_\_ Account # \_\_\_\_\_

Contact Name \_\_\_\_\_ Phone # \_\_\_\_\_

Non-Credit Card Business Reference \_\_\_\_\_ Account # \_\_\_\_\_

Contact Name \_\_\_\_\_ Phone # \_\_\_\_\_

Employer (If Employed Outside of Vending) \_\_\_\_\_

Position \_\_\_\_\_ Salary \_\_\_\_\_ Phone # \_\_\_\_\_

Spouse's Employer \_\_\_\_\_

Position \_\_\_\_\_ Salary \_\_\_\_\_ Phone # \_\_\_\_\_

Payment Preference (Check One): \_\_\_\_\_ Automatic Withdraw \_\_\_\_\_ Pay By Check/Billing Statement

**IMPORTANT - PLEASE READ BEFORE SIGNING**

I understand that Wittern Financial Services is relying on this information in extending credit and I warrant it to be true. I hereby authorize Wittern Financial Services or any bank/and or trade bureau or other investigative agencies employed by Wittern Financial Services to investigate the references herein listed or other data obtained from me or any other person pertaining to my credit and financial responsibility. The undersigned authorizes all parties contacted to release credit information requested, or its successors or assigns.

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(position of signer)

\_\_\_\_\_  
(date)