



UTECH ELECTRONICS CREDIT APPLICATION

Company

COMPANY NAME LEGAL NAME
(if different from above)

Tel

Fax

URL

Bill To Address Ship To Address
(if different from Bill To)

Date Established

Type of Ownership Sole Proprietorship Partnership Corporation:

Type of Business

Three (3) Major Customers (Required)

1

2

3

Contact Information

General Manager (Required)	<input type="text"/>	Other <input type="text"/>
		Tel <input type="text"/>
		Email <input type="text"/>
Purchasing Manager	<input type="text"/>	Tel <input type="text"/>
		Email <input type="text"/>
Finance Manager	<input type="text"/>	Tel <input type="text"/>
		Email <input type="text"/>
Accounts Payable (Required)	<input type="text"/>	Tel <input type="text"/>
		Email <input type="text"/>

Banking Information (Required)

Bank Name

Address

Tel

Fax

Contact Name

Tel

Email

Canadian Account Number

US Account Number

Business/Trade References (Require minimum of three)

Company Name

Tel

Address

Fax

Contact Person:

Company Name

Tel

Address

Fax

Contact Person

Company Name

Tel

Address

Fax

Contact Person

Company Name

Tel

Address

Fax

Contact Person

Utech Contact Person

Utech Information

Internal Use Only:		
Customer #:	Credit Limit:	
Contact #:	Terms:	Date: