



Individual Credit Application

Amount Requested \$ _____

Applicant Information

Name:		Driver License No:	
Date of Birth:	SSN:	Phone:	
Current Address:			
City:	State:	Zip:	Own { } Rent { }
E-mail Address:			

Employment Information

Current Employer:			
Employer Address:			How Long?
City:	State:	Zip:	
Phone:	Fax:	Contact:	
Name of relative not residing with you:			
Address:			
City:	State:	Zip:	Phone:
Relationship:			

Credit References (Exclude Friends, Banks and Credit Cards)

Name	Address	Phone	Fax
1.			
2.			
3.			

By submitting this application, you authorize B & J Welding Supply to make inquiries into the banking and business/trade references that you have supplied.

1. Our terms are Net 30 days from date of invoice if terms are approved. If terms are not agreed upon, this account will be COD or amounts due at time of purchase and will require credit card information to keep on file
2. Accounts not paying within terms will result in finance charges assessing each month until the past due amounts are paid in full.
3. Claims arising from invoices must be made within seven working days.

I authorize B&J Welding Supply to verify the information provided on this form as to my credit and employment history. I understand the terms of payment as outlined in this application.

Signature: _____ Date: _____

For Office Use Only

Approved By:	Amount:	Date:
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