

# Vision Imaging Supplies, Inc.

10200 Mason Ave #321, Chatsworth, CA 91311, USA

818-710-7200, 818-710-7999

sales@vis-llc.com

## CREDIT APPLICATION

### Business Information

Legal Business Name: \_\_\_\_\_

Contact Person/Title: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Years at this address: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Federal ID#: \_\_\_\_\_

Email: \_\_\_\_\_

DUNS#: \_\_\_\_\_

Resale #: \_\_\_\_\_

Business Type: Sole Proprietorship \_\_\_\_\_

Ownership: \_\_\_ Public Co. \_\_\_ Private Co. \_\_\_ Non-Profit

Partnership \_\_\_\_\_

Requested Credit Line \_\_\_\_\_

Corporation \_\_\_\_\_

Years in Business: \_\_\_\_\_

State of Incorporation/Registration of Partner \_\_\_\_\_

Date of Incorporation/Registrations of Partnership \_\_\_\_\_

Bankruptcy: \_\_\_ Yes \_\_\_ No

Individual Name (Proprietorship): \_\_\_\_\_ Telephone: \_\_\_\_\_

Partner's Names (Partnership): \_\_\_\_\_ Telephone: \_\_\_\_\_

\_\_\_\_\_ Telephone: \_\_\_\_\_

Principal's Names (Corporation): \_\_\_\_\_ Telephone: \_\_\_\_\_

\_\_\_\_\_ Telephone: \_\_\_\_\_

### Bank Reference

Bank: \_\_\_\_\_

Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Account(s) #: \_\_\_\_\_

