



APPLICATION FOR CREDIT

AMERICAN METAL FILTER COMPANY
611 MARSAT COURT
CHULA VISTA, CA 91911
PH: 619-628-1917
FAX: 800-GO AMFCO (462-6326)

NAME OF FIRM OR INDIVIDUAL			
ADDRESS			YEARS AT THIS ADDRESS
CITY	STATE	ZIP CODE	PHONE NUMBER
E-MAIL	WEBSITE		FAX NUMBER
ACCOUNTS PAYABLE CONTACT	E-MAIL TO SUBMIT INVOICES (IF DESIRED)		A/P PHONE NUMBER

ALL INFORMATION PROVIDED WILL BE HELD IN THE STRICTEST CONFIDENCE.

OWNERSHIP

<input type="checkbox"/> CORPORATION	<input type="checkbox"/> CHECK HERE IF INCORPORATED IN THE LAST 12 MONTHS	
<input type="checkbox"/> PARTNERSHIP	<input type="checkbox"/> INDIVIDUAL	
NAME(S) OF PRINCIPAL(S)	COMPLETE ADDRESS	PHONE
1		
2		
3		

FINANCE

BANK	COMPLETE ADDRESS
BANK OFFICER OR DEPARTMENT	PHONE NUMBER

REFERENCES

BUSINESS NAME	COMPLETE ADDRESS	PHONE & FAX
1		
2		
3		

I/WE CERTIFY THAT ALL THE INFORMATION ON THIS FORM IS CORRECT. BY SUBMITTING THIS APPLICATION, YOU AUTHORIZE AMERICAN METAL FILTER COMPANY TO MAKE INQUIRIES INTO THE BANKING AND BUSINESS/TRADE REFERENCES THAT YOU HAVE SUPPLIED.

SIGNED _____

DATE _____

TITLE _____