



Please fax completed application to (260) 429-1192  
 For further information please call Shirley Roth at (800) 445-8380

## CREDIT APPLICATION

GENERAL INFORMATION					
Legal Company Name:			Doing Business As:		
Federal Tax ID Number:					
Contact Name:			Title:		
Street Address:		City:		ST:	Zip:
Phone:		Fax:		Email:	
Business Structure (Select One)			Other		
OWNERSHIP INFORMATION					
Principal 1 Name:		% Ownership:	Soc Sec #:		Birth Date:
Home Address:		City:		ST:	Zip:
Phone:		Email:			
Principal 2 Name:		% Ownership:	Soc Sec #:		Birth Date:
Home Address:		City:		ST:	Zip:
Phone:		Email:			
Principal 3 Name:		% Ownership:	Soc Sec #:		Birth Date:
Home Address:		City:		ST:	Zip:
Phone:		Email:			
FINANCIAL REFERENCE INFORMATION					
Bank / Lender Name:		Account Type:		Acct No:	
Contact Name:		Contact Phone No:		Email:	
Bank / Lender Name:		Account Type:		Acct No:	
Contact Name:		Contact Phone No:		Email:	
Bank / Lender Name:		Account Type:		Acct No:	
Contact Name:		Contact Phone No.		Email:	
SUPPLIER INFORMATION					
Supplier Name:			Contact:		
Street Address:		City:		ST:	Zip:
Supplier Telephone:			Email:		
Comments:					
Supplier Name:			Contact:		
Street Address:		City:		ST:	Zip:
Supplier Telephone:			Email:		
Comments:					
EQUIPMENT DESCRIPTION					
Year:	Make:	Model:		Supply listing, if applicable:	
<b>Payment Terms: Net 20 days from invoice date.</b>					
AUTHORIZATION					
<p>I hereby certify that the information given above is true, accurate, and complete in all details and accurately reflects my financial situation as at the statement date, and that I will notify you promptly if there is a material change in such financial condition. Furthermore, I fully understand that such information shall be used to determine my credit worthiness. I authorize SIRVA, Inc., its assigns, and/or any credit grantor processing this application, to obtain, in whatever manner it may deem satisfactory, all the information it requires, whatever the source, including a credit information report from a consumer reporting agency, each such source being hereby authorized to provide any such information.</p>					
Signature of Applicant:					Date: