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CREDIT APPLICATION

Company Name:	Phone: Fax: Email:
Address:	Business Type: Corporation Partnership Independent
City/State/Zip:	Years in Business:

Application for credit is hereby made and the following references given. It is understood this information will be held in the strictest confidence and used only by Mighty Hook, Inc. Credit Department.

CEO/President:	Phone: Email:
CFO/Treasurer:	Phone: Email:

Checking Account:

Bank:	Account Number:
Branch Address	Phone: Fax:
City/State/Zip:	Contact Person:

Business References Where Credit is Now Extended:

Name:	Phone:
Address	Fax:
City/State/Zip:	Contact Person:

Name:	Phone:
Address	Fax:
City/State/Zip:	Contact Person:

Name:	Phone:
Address	Fax:
City/State/Zip:	Contact Person:

Name:	Phone:
Address	Fax:
City/State/Zip:	Contact Person:

Our Terms are Net 30 Days

Print	Title
Signature	Date