

**VALLEY LITHO SUPPLY CO.**

1047 HAUGEN AVENUE  
RICE LAKE, WI 54868

DATE \_\_\_\_\_

## CREDIT APPLICATION

COMPANY NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

COMPLETE PHONE NO: \_\_\_\_\_ COMPLETE FAX NO: \_\_\_\_\_

PRINCIPAL OWNERS: \_\_\_\_\_ NO. OF YEARS IN BUSINESS: \_\_\_\_\_

TYPE OF OWNERSHIP:     CORPORATION             PARTNERSHIP             INDIVIDUAL

**BANK REFERENCE:** NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

**BUSINESS REFERENCES:** (please give complete addresses)

NAME: \_\_\_\_\_ NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

IT IS UNDERSTOOD THIS INFORMATION IS CONFIDENTIAL AND WILL BE USED ONLY BY VALLEY LITHO CREDIT DEPARTMENT

VALLEY LITHO TERMS ON OPEN ACCOUNT ARE NET 10TH OF THE MONTH FOLLOWING MONTH OF PURCHASE. WE UNDERSTAND YOUR TERMS AND AGREE TO ABIDE BY THEM.

SIGNED: \_\_\_\_\_ TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_

FOR CREDIT DEPARTMENT USE ONLY

CREDIT ACCEPTED: YES \_\_\_\_\_ NO \_\_\_\_\_ REASONS: \_\_\_\_\_

LIMIT: \_\_\_\_\_ INITIALS: \_\_\_\_\_ DATE: \_\_\_\_\_

## CREDIT APPLICATION (PAGE 2)

Upon approval of my credit application, I would like my invoices and statements: (check 1)

Faxed to fax no. \_\_\_\_\_

E-mailed to e-mail address \_\_\_\_\_

Mailed via 1<sup>st</sup> class mail to my billing address.

***VALLEY LITHO SUPPLY***

**1047 HAUGEN AVENUE**

**RICE LAKE, WI 54868**

**(800)826-6781**

**(800)962-5924 Fax**