



A Plus Mobile Maintenance  
P.O. Box 0643, Brea, CA 92822  
714-494-4538 Telephone • 714-494-7669 Fax

## CREDIT APPLICATION

Firm Name: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Position: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail \_\_\_\_\_

Business Type or Product Manufactured: \_\_\_\_\_

Year Established: \_\_\_\_\_ Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Individual \_\_\_\_\_

Will Any Parts Purchase from A Plus Mobile Maint. be for resale? Yes \_\_\_ No \_\_\_ *If "Yes", please attached resale permit.*

### Names of Business Principals:

Name of Owner / President of Company: \_\_\_\_\_ Title: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Other Contact / Partner / Corporate Officer: \_\_\_\_\_ Title: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

### Local Trade References and Bank References (or attach information)

Firm Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Fax: \_\_\_\_\_

Firm Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Fax: \_\_\_\_\_

Bank: \_\_\_\_\_ Phone: \_\_\_\_\_ Acct No. \_\_\_\_\_

### Billing Information:

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Accounts Payable Contact: \_\_\_\_\_ Phone \_\_\_\_\_

Purchased Order Required: Yes \_\_\_ No \_\_\_ Method of Submitting Invoices \_\_\_\_\_

As a representative of the above named company, the undersigned applies for open credit at A Plus Mobile Maint. and gives authorization to obtain information from references listed for the purpose of approving this application. As a representative of the company, I acknowledge that our account terms with A Plus Mobile Maint. are NET 30 days from the invoice date.

Authorized By: (signature) \_\_\_\_\_ (Print Name): \_\_\_\_\_