

# ON TIME PERMITS LLC

## CREDIT APPLICATION

### BUSINESS INFORMATION

Full Legal Name and dba		Tax Identification	
Billing Street Address		Anticipated Volume of Business (Monthly)	
City/County/State/Zip			
Contact	Title	Phone Number	<input type="checkbox"/> Proprietorship <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Not for Profit <input type="checkbox"/> Corporation <input type="checkbox"/> S Corporation Date of Inc. _____ State of Inc. _____ <input type="checkbox"/> Limited Liability
Nature of Business	Years in Business	No. of Employees	
Principal/Partner/Officer	Title	Social Security Number	
Home Street Address			
City/State/Zip		Phone Number	
Principal/Partner/Officer	Title	Social Security Number	
Home Street Address			
City/State/Zip		Phone Number	

### BANK REFERENCES

Bank Name 1.	Account Officer/Dept.	Phone Number
Address (City, State)		Account Number
Bank Name 2.	Account Officer/Dept.	Phone Number
Address (City, State)		Account Number

### TRADE REFERENCES

Business Name, City, State	Contact Name	Account Number	Phone Number
Business Name, City, State	Contact Name	Account Number	Phone Number
Business Name, City, State	Contact Name	Account Number	Phone Number

I represent that the above information is true and given to induce On Time Permits LLC to extend credit to the applicant. My company and I authorize On Time Permits LLC to make such credit investigation as On Time Permits LLC sees fit, including contacting the above bank and trade references and obtaining credit reports. My company and I authorize all trade references, banks, and credit reporting agencies to disclose to On Time Permits LLC any and all information concerning the financial and credit history of my company and myself.

In addition, I acknowledge that all invoices are due upon receipt and are considered past due if payment is not received within 30 days. My company will assume responsibility for paying all court costs and attorney's fees required to enforce collection if our account is not kept within terms.

Authorized Signature

Printed Name

Title

Date