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**APPLICATION FOR CREDIT**

Applicant \_\_\_\_\_

Telephone # (\_\_\_\_) \_\_\_\_\_ FAX # (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Company Type: (*check one*) Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Sole Proprietor \_\_\_\_\_  
Principles: \_\_\_\_\_

Federal ID Number \_\_\_\_\_ Resale Tax ID Number \_\_\_\_\_

**FINANCE:**

Bank \_\_\_\_\_ Telephone# \_\_\_\_\_ Fax# \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Savings Acct# \_\_\_\_\_ Checking Acct# \_\_\_\_\_

Contact \_\_\_\_\_

**REFERENCES:**

1. Name \_\_\_\_\_ Telephone # \_\_\_\_\_ Fax# \_\_\_\_\_

Account# \_\_\_\_\_

Address \_\_\_\_\_ City State, Zip \_\_\_\_\_

2. Name \_\_\_\_\_ Telephone # \_\_\_\_\_ Fax# \_\_\_\_\_

Account# \_\_\_\_\_

Address \_\_\_\_\_ City State, Zip \_\_\_\_\_

3. Name \_\_\_\_\_ Telephone # \_\_\_\_\_ Fax# \_\_\_\_\_

Account# \_\_\_\_\_

Address \_\_\_\_\_ City State, Zip \_\_\_\_\_

**ATTEST:**

I certify that the information above is true and I further authorize MK Battery to check our credit experiences. I can and will comply with the terms and conditions of such credit as you extend.

Signature \_\_\_\_\_ Date \_\_\_\_\_

TEL (800) 372-9253 \* TEL (714) 937-1033 \* FAX (714) 937-0818  
1631 S. Sinclair Street \* Anaheim, CA 92806