

# KILGORE TIRE CENTER, INC.

## CREDIT APPLICATION

FAX# 903 984-6569 / OFFICE # 903 984-3536 / [WWW.KILGORETIRECENTER.COM](http://WWW.KILGORETIRECENTER.COM)

### NAME / ADDRESS

LAST: FIRST: MIDDLE INITIAL: TITLE

NAME OF BUSINESS: TAX ID#

ADDRESS:

CITY: STATE ZIP:

PHONE# FAX# EMAIL:

### COMPANY INFORMATION

TYPE OF BUSINESS IN BUSINESS SINCE

LEGALFORM UNDER WHICH OPERATES:

STATE / PROVINCE: CORPORATION \_

PARTNERSHIP \_ PROPRIETORSHIP \_

IF DIVISION / SUBSIDIARY, NAME OF PARENT COMPANY: BUSINESS SINCE:

COMPANY RESPONSIBLE FOR BUSINESS TRANSACTIONS: TITLE:

ADDRESS:

CITY: STATE ZIP:

PHONE# FAX# EMAIL:

### BANK REFERENCES

INSTITUTION NAME:

CHECKING ACCOUNT \_ SAVINGS ACCOUNT \_

ADDRESS:

CITY: STATE ZIP:

PHONE# FAX# EMAIL:

**TRADE REFERENCES**

COMPANY NAME	CONTACT NAME:	PHONE#
ADDRESS: _____		
COMPANY NAME	CONTACT NAME:	PHONE#
ADDRESS: _____		
COMPANY NAME	CONTACT NAME:	PHONE#
ADDRESS: _____		

**PURCHASE ORDERS REQ \_\_\_\_\_ PERSON(S) AUTHORIZED \_\_\_\_\_**

**TAXABLE \_\_\_\_\_ NON-TAXABLE \_\_\_\_\_ IF SO, PLEASE ATTACH TAX CERTIFICATE**

**FINANCIAL INFORMATION**

COMPANY TOTAL ASSETS/ INCOME:	TOTAL LIABILITIES:	ANNUAL NET:
HAVE YOU OR YOUR OFFICE EVER FILED A PETITION FOR BANKRUPTCY?		YES _ / NO _
IS YOUR COMPANY SUBJECT TO ANY LITIGATION?		YES _ / NO _
IF SO, DESCRIBE: _____		
_____		
_____		

**WE DECLARE THAT THE ABOVE INFORMATION IS TRUE CORRECT AND COMPLETE AND IS GIVEN TO INDUCE THE COMPANY, KILGORE TIRE CENTER, TO EXTEND CREDIT. WE AUTHORIZE THE COMPANY, KILGORE TIRE CENTER, TO MAKE SUCH CREDIT INVESTIGATIONS AS THE COMPANY SEES FIT, INCLUDING CONTACTING THE ABOVE TRADE REFERENCES AND BANKS AND OBTAINING CREDIT REPORTS. WE AUTHORIZE ALL TRADE REFERENCES, BANKS AND CREDIT REPORTING AGENCIES TO DISCLOSE TO THE COMPANY, KILGORE TIRE CENTER, ANY AND ALL INFORMATION CONCERNING THE FINANCIAL AND CREDIT HISTORY OF MY COMPANY AND MYSELF:**

**WE AGREE TO PAY ACCORDING TO THE TERMS OF KILGORE TIRE CENTER, WHICH ARE NET 30 DUE BY THE 10<sup>TH</sup> OF THE FOLLOWING MONTH, UNLESS OTHER TERMS ARE AGREED UPON:**

**NAME OF COMPANY: \_\_\_\_\_**

**AUTHORIZED SIGNATURE: \_\_\_\_\_**

**TITLE: \_\_\_\_\_**

**PRINTED NAME: \_\_\_\_\_ DATE \_\_\_\_\_**