



Application for Credit

For TCS use only	
Customer #	_____
Sales rep. #	_____
Prospect Record:	yes no
Approved	_____

Name of Company: _____
 Billing Address: _____ City _____ State _____ Zip Code _____
 Phone: () _____ Fax: () _____
 Ownership: Corporation Partnership Individual
 Name(s) of Principal/Managing Partner/Owner: _____
 Name of Accounts Payable Contact: _____
 Line of Business: _____ Number of Yrs. in Business: _____
 Dun & Bradstreet # _____

Bank Reference

Bank: _____
 Address: _____
 Contact Name: _____
 Phone: () _____ Fax: () _____
 Type of Account: _____ Account Number: _____

Credit References (please supply four)

Company Name: _____	Company Name: _____
Contact: _____	Contact: _____
Account Number: _____	Account Number: _____
Address: _____	Address: _____
City/State/Zip: _____	City/State/Zip: _____
Phone: () _____ Fax: () _____	Phone: () _____ Fax: () _____

Company Name: _____	Company Name: _____
Contact: _____	Contact: _____
Account Number: _____	Account Number: _____
Address: _____	Address: _____
City/State/Zip: _____	City/State/Zip: _____
Phone: () _____ Fax: () _____	Phone: () _____ Fax: () _____

This application serves as authorization for the above listed bank and references to release information to TCS/Basys Controls. We certify that all the information on this form is correct. We fully understand TCS Basys Control's credit terms (Net 30 Days) and agree to the proper payment in consideration for extended credit.

Signature: _____ Title: _____ Date: _____

