



Laundry Equipment Sales & Service

Application for Credit

Please Return Application to Danielle Trbovich
Corporate Office: 409 Biltmore Drive, Fenton, MO 63026
Phone: 800.783.6665 x4913
Fax: 636.600.4950
Email: dtrbovich@loomisbros.com

Company/Billing Information

Date: _____
Legal Company Name: _____
DBA: _____
Fed Tax ID: _____
State of Incorporation/Organization: _____
Billing Address: _____
City: _____
State: _____ Zip: _____ County: _____
A/P Contact: _____
Phone: (____) _____
Fax: (____) _____
Email: _____
Would you prefer to receive invoices via email?
 Yes No
Years in Business: _____
Type of Business: _____
 Partnership Corporation Individual LLC
Tax Status: Taxable Tax Exempt
If tax exempt, please attach tax exemption certificate.

Laundry Equipment Location

(If different from Company/Billing Information)
Address: _____
City: _____
State: _____ Zip: _____ County: _____

Bank Information

Principal Bank: _____
Account Number: _____
Phone: (____) _____
Fax: (____) _____

Principal Information

Name: _____
Home Address: _____
City: _____
State: _____ Zip: _____ County: _____
Phone: (____) _____
Fax: (____) _____

Trade References (Please provide three)

Company Name: _____ Contact: _____
Phone: (____) _____ Fax: (____) _____
Company Name: _____ Contact: _____
Phone: (____) _____ Fax: (____) _____
Company Name: _____ Contact: _____
Phone: (____) _____ Fax: (____) _____
Requested Credit Limit: \$500 \$1,000 \$2,500 \$5,000 \$10,000 Other _____

Applicant's signature attests financial responsibility, ability and willingness to pay our invoices in accordance with the following terms:

THE ABOVE INFORMATION IS OFFERED FOR YOUR CONSIDERATION AS A BASIS FOR THE EXTENSION OF CREDIT WITH US, ON TERMS OF **NET 30 DAYS**
FROM DATE OF INVOICE, WITH PAST DUE ITEMS SUBJECT TO A 1 1/2% MONTHLY SERVICE CHARGE. WE HEREBY AUTHORIZE
YOU TO CONTACT OUR TRADE AND BANK REFERENCES FOR NORMAL INFORMATION AS MAY BE REQUIRED BY YOUR FIRM.

FIRM NAME: _____
SIGNATURE: _____ TITLE: _____
PRINTED NAME: _____