

M. LEVIN & COMPANY, INC.
6700 ESSINGTON AVENUE UNITS H-2 – H-5
PHILADELPHIA, PA 19153
P: 215-336-2900 F: 215-755-6757

CREDIT APPLICATION

TRADE NAME:

TELEPHONE NUMBER:

FAX NUMBER:

EMAIL:

BUSINESS ADDRESS:

FEDERAL TAX ID NUMBER:

DATE BUSINESS ESTABLISHED:

SOLE PROPRIETOR: _____ PARTNERSHIP: _____ CORPORATION: _____

BANK (AND ADDRESS OF BANK):

BANK ACCOUNT NUMBER:

CREDIT REFERENCES (NAME AND PHONE # - MUST BE THREE ACTIVE CHARGES):

1. _____
2. _____
3. _____

PRINCIPALS: 1. _____ 2. _____

NAME AND TITLE

NAME AND TITLE

ADDRESS

ADDRESS

CITY, STATE, ZIPCODE

CITY, STATE, ZIPCODE

RESIDENCE TELEPHONE #

RESIDENCE TELEPHONE #

SOCIAL SECURITY #

SOCIAL SECURITY #

TERMS: THE UNDERSIGNED CERTIFIES THE ABOVE INFORMATION TO BE CORRECT, THAT IT IS SUBMITTED FOR THE PURPOSE OF OBTAINING CREDIT, AND AGREES TO ALL OF THE TERMS AND CONDITIONS OF SALE OF M. LEVIN & COMPANY, INC. IF APPROVED FOR CREDIT, PAYMENT IS DUE 7 DAYS FROM STATEMENT DATE. WE WILL ASSES A CHARGE OF \$25.00 FOR ANY CHECK SENT IN FULL OR PARTIAL P AYMENT OF YOUR ACCOUNT IF THE CHECK IS NOT HONORED BY YOUR BANK. ALL DELINQUENT UNPAID INVOICES ARE SUBJECT TO INTEREST AT THE RATE OF 1.5% PER MONTH (18% PER YEAR), COLLECTION FEES, INCLUDING WITHOUT LIMITATION, REASONABLE ATTORNEY'S FEES, INCURRED TO RECOVER ANY UNPAID AMOUNTS. THE INTEREST AND COLLECTION COSTS WILL BE CONSIDERED SUMS OWNING IN CONNECTION WITH UNPAID TRANSACTIONS COVERED BY THE PROVISIONS OF THE PACA TRUST.

DATE: _____ SIGNATURE: _____