



**CREDIT APPLICATION**

17 Hampshire Drive, Hudson, NH 03051  
Phone: 603-886-3900 | Fax: 603-886-4545  
www.globalamericaninc.com

**BUSINESS CONTACT INFORMATION**

|                              |              |                  |        |
|------------------------------|--------------|------------------|--------|
| Company Name:                |              |                  |        |
| Accounts Payable Contact:    |              | A/P Email:       |        |
| Billing Address:             |              | A/P Phone:       |        |
| City:                        | State:       | ZIP Code:        |        |
| How long at current address? |              | Company Website: |        |
| Federal Tax ID#:             |              | DUNS#:           |        |
| Date Business Commenced:     |              | # of Employees:  |        |
| Sole Proprietorship:         | Partnership: | Corporation:     | Other: |

**BANK REFERENCE**

|                  |                 |           |  |
|------------------|-----------------|-----------|--|
| Bank name:       |                 |           |  |
| Bank address:    |                 | Phone:    |  |
| City:            | State:          | ZIP Code: |  |
| Type of Account: | Account Number: |           |  |
| Savings:         |                 |           |  |
| Checking:        |                 |           |  |
| Other:           |                 |           |  |

**BUSINESS/TRADE REFERENCES (EITHER COMPLETE BELOW OR ATTACH)**

|               |        |           |  |
|---------------|--------|-----------|--|
| Company Name: |        |           |  |
| Contact Name: |        |           |  |
| Address:      |        |           |  |
| City:         | State: | ZIP Code: |  |
| Phone:        | Fax:   | E-mail:   |  |
| Company Name: |        |           |  |
| Contact Name: |        |           |  |
| Address:      |        |           |  |
| City:         | State: | ZIP Code: |  |
| Phone:        | Fax:   | E-mail:   |  |
| Company Name: |        |           |  |
| Contact Name: |        |           |  |
| Address:      |        |           |  |
| City:         | State: | ZIP Code: |  |
| Phone:        | Fax:   | E-mail:   |  |

**AGREEMENT**

Submittal of this credit application is automatic agreement to our [terms and conditions](#). Terms are not guaranteed and are subject to change.

Signature:

Date: