



# COI RUBBER PRODUCTS, INC.

19255 San Jose Avenue Unit D1 City of Industry, CA 91748

Tel: (626) 598-5057 Fax: (626) 581-2335

## CREDIT APPLICATION

### CREDIT TERM:

Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Address \_\_\_\_\_ Number of years at this address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Contact Number \_\_\_\_\_

**THE FOLLOWING INFORMATION MUST BE COMPLETED IN FULL  
ALL INFORMATION IS CONFIDENTIAL AND IN COMPLIANCE WITH COMPANY POLICY**

Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Proprietorship \_\_\_\_\_  
Individual \_\_\_\_\_ Incorporated Within Last 12 Months \_\_\_\_\_

Name(President) \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

### FINANCE:

Bank Name \_\_\_\_\_ Telephone \_\_\_\_\_

Fax \_\_\_\_\_

Bank Address \_\_\_\_\_ Account Representative \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Account Number \_\_\_\_\_

Tax ID Number \_\_\_\_\_

### TRADE REFERENCES:

Name \_\_\_\_\_ Tel No: \_\_\_\_\_ Fax No: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Name \_\_\_\_\_ Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Name \_\_\_\_\_ Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

WE CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT, AND THAT WE CAN AND WILL COMPLY WITH YOUR CREDIT TERMS AND CONDITIONS. WE PERSONALLY GUARANTEE ALL DEBTS OWED TO COI RUBBER PRODUCTS, INC., AND WE HEREBY GRANT AUTHORITY FOR RELEASE OF ACCOUNT INFORMATION FROM OUR BANK TO COI RUBBER PRODUCTS, INC.

Print Name \_\_\_\_\_ Title \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_