



**HOOK-FAST SPECIALTIES, Inc.**

P.O. BOX 1088, PROVIDENCE, R.I. 02901-1088  
office (401) 781-4466 fax (401) 781-5533 www.hookfast.com

***HOOK-FAST CREDIT APPLICATION***

**COMPANY NAME** \_\_\_\_\_ **DATE** \_\_\_\_\_

**BILLING ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP CODE** \_\_\_\_\_

**TEL.#** \_\_\_\_\_ **FAX #** \_\_\_\_\_ **FED ID #** \_\_\_\_\_

**E-MAIL** \_\_\_\_\_ **TAX EXEMPT #** \_\_\_\_\_

**TYPE OF BUSINESS** \_\_\_\_\_ **YEAR ESTABLISHED** \_\_\_\_\_

**SHIPPING ADDRESS (IF DIFFERENT THAN BILLING ADDRESS)**  
\_\_\_\_\_  
\_\_\_\_\_

**SUBMITTED BY** \_\_\_\_\_

**PURCHASING AGENT:** \_\_\_\_\_

**OWNERS/OFFICERS:**

President: \_\_\_\_\_ Home Address \_\_\_\_\_

Vice President: \_\_\_\_\_ Home Address \_\_\_\_\_

Other Officer: \_\_\_\_\_ Home Address \_\_\_\_\_

**CREDIT REFERENCES: PLEASE PROVIDE COMPLETE ADDRESS AND FAX NUMBERS**

**BANK:** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**TELEPHONE** \_\_\_\_\_

**CONTACT** \_\_\_\_\_

**CHECKING ACCOUNT NUMBER** \_\_\_\_\_

1. \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**TELEPHONE** \_\_\_\_\_

**FAX NUMBER** \_\_\_\_\_

**CONTACT** \_\_\_\_\_

2. \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**TELEPHONE** \_\_\_\_\_

**FAX NUMBER** \_\_\_\_\_

**CONTACT** \_\_\_\_\_

3. \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**TELEPHONE** \_\_\_\_\_

**FAX NUMBER** \_\_\_\_\_

**CONTACT** \_\_\_\_\_

IT IS UNDERSTOOD THAT WE MAY DRAW A CREDIT REPORT TO ENABLE CREDIT WORTHINESS. I HEREBY WARRANT AND GUARANTEE THAT THE STATEMENTS IN THIS CREDIT APPLICATION ARE TRUE AND MADE FOR THE PURPOSE OF OBTAINING CREDIT.

**SIGNATURE OF OFFICER** \_\_\_\_\_ **TITLE** \_\_\_\_\_ **DATE** \_\_\_\_\_