

BRENNAN INDUSTRIES

CORPORATE OFFICES
6701 Cochran Rd.
SOLON, OHIO 44139
Ph. (440) 248-7088
Fax (440) 248-9375
Toll Free (800) 331-1523

CUSTOMER CREDIT APPLICATION

COMPANY NAME AND ADDI	RESS INFORMATION					
Bill To:			Ship To:			
			_			
City:	St: Zip:		_ City:		St:	Zip:
Phone #	Fax #		Phone #		Fax #	<u> </u>
GENERAL BUSINESS INFORM	IATION					
Type of Business:						
Sale Tax and or Use Tax Exem				Resale #		
Length of time in business						
Officers						
Name	Title		Phone		Email	
Purchasing Agents						
Name	Phone/Ext		Email			
Accounts Payable						
Name	Phone/Ext		Email			
BANK INFORMATION						
Bank Name		Officer			Phone #	
TRADE CREDIT REFERENCES	Please list Company	v Name A	idress & Fax	numhere		
1				ituitioe15.		
2						
3						
4.						
We certify that all informat	tion on this form is co information in	orrect; and considerati	hereby author ion with the ex	rize Brennan Indu xtension credit.	ıstries to inv	estigate the above
Signed		Title			Date	