

# K&A RECOVERY

159 RT 23 NORTH  
SUSSEX, NJ 07461  
973-896-6716 PHONE  
973-875-7292 FACSIMILE

**COMMERCIAL**  
APPLICATION FOR CREDIT

COMPLETED & SIGNED BY CUSTOMER

**Company Name** \_\_\_\_\_

Business Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Location Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Bus Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Pager # \_\_\_\_\_ Mobil# \_\_\_\_\_

E-Mail Address \_\_\_\_\_

**Contact** \_\_\_\_\_ Title \_\_\_\_\_

Relative \_\_\_\_\_ Phone \_\_\_\_\_

Business Start Date \_\_\_\_\_

Federal ID Number \_\_\_\_\_

Sole Owner

Check one  Partnership

Corporation State Inc. in: \_\_\_\_\_ Date: \_\_\_\_\_

Type of Business (in detail) \_\_\_\_\_

**Dealer / Seller** \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Rep Name \_\_\_\_\_

Bus Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

**Equipment**

**Cost Breakdown** \$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

## Bank & Trade Information

**Bank** \_\_\_\_\_ Town / State \_\_\_\_\_ Phone # \_\_\_\_\_ Contact \_\_\_\_\_

Business Account # \_\_\_\_\_ Account # \_\_\_\_\_ Personal Account # \_\_\_\_\_

**Trade** \_\_\_\_\_ Town / State \_\_\_\_\_ Phone # \_\_\_\_\_ Contact \_\_\_\_\_

**Trade** \_\_\_\_\_ Town / State \_\_\_\_\_ Phone # \_\_\_\_\_ Contact \_\_\_\_\_

## Principal / Owner

**Full Name** \_\_\_\_\_ Social Security Number \_\_\_\_\_ Title \_\_\_\_\_ Ownership % \_\_\_\_\_

Home Address \_\_\_\_\_ Home Phone # \_\_\_\_\_

Are you a U.S. citizen? YES \_\_\_\_\_ NO \_\_\_\_\_ If NO, please provide country of citizenship \_\_\_\_\_

**Full Name** \_\_\_\_\_ Social Security Number \_\_\_\_\_ Title \_\_\_\_\_ Ownership % \_\_\_\_\_

Home Address \_\_\_\_\_ Home Phone # \_\_\_\_\_

Are you a U.S. citizen? YES \_\_\_\_\_ NO \_\_\_\_\_ If NO, please provide country of citizenship \_\_\_\_\_

By signing below the undersigned individual(s), who is either a principal of the credit application or a personal guarantor of its obligations, provides written instructions to K&A Recovery or its designees, assignee and/or successor(s)-in-interest authorizing review of his/her personal credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in considering this application and subsequently for the purposes of update, renewal or collecting the resulting account. A copy of this application shall be valid as the original.

X  
\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Print Name) Dated: \_\_\_\_\_

X  
\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Print Name) Dated: \_\_\_\_\_