

COMMTECH, INC. CREDIT APPLICATION

After you have completed the form, print it out and fax it to (316) 636-1163.

COMPANY INFORMATION

NAME:			
BILLING ADDRESS:			
SHIPPING ADDRESS:			
TYPE OF BUSINESS:	CORPORATION	PARTNERSHIP	OTHER
TAX ID NUMBER:			
DUNS NUMBER:			
SALES TAX EXEMPT:	YES	NO	NUMBER:
CORP. OFFICERS:	NAME AND ADDRESS	TELEPHONE AND FAX NUMBERS	
PRESIDENT:			
VICE-PRESIDENT:			
SECRETARY:			
TREASURER:			
PURCHASER:			

TRADE REFERENCES

NAME AND ADDRESS	CONTACT AND ACCOUNT NUMBER	TELEPHONE AND FAX NUMBERS

BANK REFERENCE

NAME AND ADDRESS	CONTACT AND ACCOUNT NUMBER	TELEPHONE AND FAX NUMBERS

CERTIFICATION

SIGNATURE	NAME:
	TITLE:
	DATE:

Thank you. All information will be held in strictest confidence.

Print form