



Credit Application

P.O. Box 13279
Portland OR 97232
Phone: 503-282-2566
Fax: 503-282-1755
E-mail: ap@feenaughty.com

CUSTOMER INFORMATION

Legal Name: _____ Trade or DBA Name: _____

Physical Address: _____ Billing Address: _____

Business Type: _____ Gross Sales: _____

Phone: _____ E-mail: _____ Tax ID: _____

Cell: _____ Fax: _____ Years in business: _____

PRINCIPAL INFORMATION (if applicable)

Full Name: _____ Title: _____

Address: _____ DOB: _____

Social: _____

Full Name: _____ Title: _____

Address: _____ DOB: _____

Social: _____

BANK AND REFERENCE INFORMATION

Bank: _____ City, State: _____

Phone: _____ Contact Name: _____

Reference: _____ City, State: _____

Phone: _____ Contact Name: _____

Reference: _____ City, State: _____

Phone: _____ Contact Name: _____

AUTHORIZATION

Applicant authorizes the release of business and personal credit information to Feenaughty Machinery Company and its affiliates to include the right to pull credit bureau information on all parties identified as principals or owners.

X _____

Signature

Print Name

Date

X _____

Signature

Print Name

Date