



**CREDIT APPLICATION FOR DUNLAP SUPPLY**  
**13 S SMITH ST**  
**BATESVILLE, IN 47006**  
**PHONE: 812-934-2710 / FAX: 812-934-2718**  
**DUNLAPS.STORE@GMAIL.COM**

**A. COMPLETE IF A BUSINESS ENTITY:**

BUSINESS NAME: \_\_\_\_\_  
PERSON RESPONSIBLE FOR BILL/ACCOUNTS PAYABLE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**B. COMPLETE IF A PERSONAL ACCOUNT:**

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_  
PLACE OF EMPLOYMENT: \_\_\_\_\_ HIRE DATE: \_\_\_\_\_

**C. FINANCIAL INFORMATION**

PLACE OF BANKING: \_\_\_\_\_ BANK PHONE NUMBER: \_\_\_\_\_  
CONTACT PERSON @ BANK: \_\_\_\_\_  
CREDIT LIMIT REQUESTED FROM DUNLAP SUPPLY: \_\_\_\_\_

I HEREBY AUTHORIZE THE RELEASE OF INFORMATION BY THE BANK AND REFERENCES LISTED ABOVE TO DUNLAP SUPPLY. THE INFORMATION RELEASED WILL BE HELD IN THE STRICTEST CONFIDENCE BY DUNLAP SUPPLY.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

SHOULD YOU BE APPROVED FOR A CREDIT ACCOUNT WITH DUNLAP SUPPLY, HERE IS MORE INFORMATION REGARDING OUR ACCOUNT HOLDER BENEFITS AND PROCEDURES:

- INVOICES WILL BE EMAILED. IF YOU WANT A PRINTED COPY YOU WILL NEED TO PICK IT UP AT THE STORE.
- STATEMENTS ARE MAILED AT THE END OF THE MONTH AND ARE DUE ON THE 10TH.
- THERE IS A 10% RESTOCK FEE ON CREDIT CARD PURCHASES THAT ARE RETURNED.
- A 2% MONTHLY FEE IS CHARGED TO ALL ACCOUNTS WITH OVERDUE INVOICES.
- IF YOU HAVE ACCOUNT QUESTIONS, PLEASE CALL 812-934-2710 AND ASK FOR SAMANTHA.

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TO BE COMPLETED BY REFERENCES

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HOW LONG HAVE YOU BEEN DOING BUSINESS WITH THE BUSINESS OR PERSON ABOVE?

- OVER 20 YEARS
- 10-19 YEARS
- 4-9 YEARS
- 1-3 YEARS
- LESS THAN 1 YEAR

WHAT TYPE OF ACCOUNT(S) DOES THE APPLICANT HAVE WITH YOU?

\_\_\_\_\_

WHAT HAS BEEN THE HIGHEST FIGURE ON THIS ACCOUNT? \_\_\_\_\_

WHAT IS THE CURRENT BALANCE ON THIS ACCOUNT? \_\_\_\_\_

HOW WOULD YOU CLASSIFY THE APPLICANT'S RECORD OF PAYMENT?

- EXTREMELY PROMPT/ON TIME
- FAIR
- EXTREMELY POOR

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_ YOUR TITLE: \_\_\_\_\_

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TO BE COMPLETED BY OFFICE STAFF

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THIS CLIENT WAS:

APPROVED

DECLINED

BY:

SAMANTHA

ANN

DIANE

CINDY

OTHER: \_\_\_\_\_

DATE: \_\_\_\_\_

PERSON/COMPANY NOTIFIED OF STATUS ON \_\_\_\_\_ VIA \_\_\_\_\_

## REFERENCES:

1.) NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

FAX: \_\_\_\_\_

2.) NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

FAX: \_\_\_\_\_

3.) NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

FAX: \_\_\_\_\_