

CREDIT APPLICATION FOR A BUSINESS ACCOUNT			
BUSINESS CONTACT INFORMATION			
Company name:			
Federal Tax Id:			
Phone:	Fax:	E-mail:	
Company address:			
City:		State:	ZIP Code:
Date business established/Inco	rporated:		
Sole Proprietor:	Partnership:	Corporation:	Other:
OWNER/OFFICER INFORMATION			
Owner/Officer Name:		Title:	SSN:
Home address:			
City:	State:	Zip:	
Telephone:	Fax:	Email:	
Email Invoices? Y N	Email Statements? Y N	Billing Email:	
BANK INFORMATION			
Bank name/branch:			
Bank Officer name:			
Telephone:			
Bank address:			
City:		State:	ZIP Code:
Type of account:	Account number:		
BUSINESS/TRADE REFERENCES			
Company name:			
Address:		Chaba	
City:	F	State:	ZIP Code:
Phone:	Fax:	E-mail:	
Type of account:			
Company name: Address:			
		State:	ZID Codo:
City: Phone:	Fax:	E-mail:	ZIP Code:
Type of account:	1 dX.		
Company name:			
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	211 6006.
Type of account:	1 47.	E man.	
AGREEMENT			
All invoices are due and payable			
All involces are due and payable		wing date of purchase.	
Personal Guarantee: In consideration for the extension of credit by C.J. Horner, Co., I/We do personally I payments of			
sales, including service charges at the rate of 1.5% per month (unless relative law requires a lesser rate) and all collection			
costs, including reasonable attorney fees.			
SIGNATURE(S)			
Name:		Name:	
Title:		Title:	
Date:		Date:	
Please email completed applications to Larry Barentine@cibornerinc.com or return in person to			

105 W. Grand Ave., Hot Springs, AR 71901.