

**SOUTH SHORE GENERATOR SERVICE  
APPLICATION FOR CREDIT**

**ALL QUESTIONS MUST BE ANSWERED COMPLETELY OR WE  
CANNOT PROCESS. ! PLEASE PROVIDE FAX#'S FOR YOUR  
REFERENCES TO EXPEDITE THE PROCESS**

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

We wish to open an account with your company and submit the following confidential information to enable you to obtain a credit history for that purpose.

FIRM NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TYPE OF BUSINESS \_\_\_\_\_

TELEPHONE# \_\_\_\_\_ FAX# \_\_\_\_\_

CORPORATION - YES/NO

PROPRIETORSHIP - YES/NO

PARTNERSHIP - YES/NO

YEARS

ESTABLISHED \_\_\_\_\_

PRINCIPALS (NAMES OF OFFICERS OR OWNERS) AND THEIR TITLES

\_\_\_\_\_

\_\_\_\_\_

TRADE REFERENCES

NAME \_\_\_\_\_ PHONE# \_\_\_\_\_ FAX# \_\_\_\_\_

ACCOUNT# \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

NAME \_\_\_\_\_ PHONE# \_\_\_\_\_ FAX# \_\_\_\_\_

ACCOUNT# \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

NAME \_\_\_\_\_ PHONE# \_\_\_\_\_ FAX# \_\_\_\_\_  
 ACCOUNT# \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**BANK REFERENCE**

**BRANCH**  
 NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 \_\_\_\_\_  
 PHONE# \_\_\_\_\_  
 FAX# \_\_\_\_\_  
 CONTACT \_\_\_\_\_  
 ACCOUNT# \_\_\_\_\_

**REQUESTED**  
 BY \_\_\_\_\_ TITLE \_\_\_\_\_  
 (PLEASE PRINT)

**SIGNATURE OF**  
**REQUESTER** \_\_\_\_\_

-----  
 -----DO NOT WRITE BELOW -FOR OFFICE USE ONLY-----  
 -----

NO.	HIGH CREDIT	YRS CREDIT EST.	CREDIT STANDING	REMARKS
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

**CREDIT DEPARTMENT**  
**REMARKS:** \_\_\_\_\_  
 \_\_\_\_\_

**DATE APPROVED** \_\_/\_\_/\_\_

**CREDIT AMOUNT APPROVED \$** \_\_\_\_\_

**AUTHORIZED BY** \_\_\_\_\_