



APPLICATION FOR CREDIT

Administration Office
4950 McKennon Road Pendleton, Or 97801
Phone: (541) 276-0741

The undersigned (thereinafter "applicant") hereby requests that Rocky Mountain Colby Pipe Company extend credit to applicant and hereby furnishes the following information for the purpose of inducing Rocky Mountain Colby Pipe Company to extend credit to applicant.

Firm Name: _____ Phone: () _____
Fax: () _____
Street Address: _____ City: _____ State: _____ Zip: _____
Mailing Address: _____ City: _____ State: _____ Zip: _____

Name of Principal: _____
Home Address: _____ Phone: () _____
Number of Years in Business: _____ Resale: Y ☐ N ☐ Type of Business: _____
Who may Purchase: _____
Monthly High Requested: _____ Financial Statement: Y ☐ N ☐

BANK REFERENCE:

Bank Name & Branch: _____ Account #: _____
Address: _____ City: _____ Zip: _____
Contact: _____ Phone: () _____ Fax: () _____

TRADE REFERENCES: (Local preferred)

Name: _____	Name: _____
Address: _____	Address: _____
_____	_____
Fax: () _____	Fax: () _____
Name: _____	Name: _____
Address: _____	Address: _____
_____	_____
Fax: () _____	Fax: () _____

I declare under penalty of perjury that the foregoing information is true and correct. In the event Rocky Mountain Colby Pipe Company shall bring any legal action to collect any amount due from applicant to Rocky Mountain Colby Pipe Company, applicant shall pay all costs and attorney's fees incurred by Rocky Mountain Colby Pipe Company in said action.

(Date) (President or Owner)