



P. O. Box 1590, La Porte, TX 77572
10020 Bayport Blvd., Pasadena, TX 77507
(281) 474-4210 Fax (281) 474-4226

INSTRUCTIONS: Please fill in all blanks and answer all questions. Please print or type all information requested as it is needed to properly process this application and for only this purpose. Failure to complete all items may result in delay and inconvenience to you. Please be assured that all information will be held in the strictest confidence.

CREDIT APPLICATION

Company Name:

Check Appropriate Box: Sole Proprietor Partnership Corporation Other: _____

Federal Tax I.D. No.

DUNS No.

Subsidiary of:

Division:

Street Address:

City:

State:

Zip Code:

Phone No:

Fax No.

Mailing Address

City:

State:

Zip Code:

Accounting Contact:

Phone No.:

Requested Credit Amount

Owner(s) / Corporate Officers

Name:

Title:

Name:

Title:

Name:

Title:

Bank Information

Bank Name:

Account Officer:

Street Address:

City:

State:

Zip Code:

Phone No:

Fax No.

Checking Account #

Saving Account #

Trade References

Name 1:

Contact:

Street Address:

City:

State:

Zip Code:

Phone No:

Fax No.



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Trade References (cont'd)

Name 2:	Contact:	
City:	State:	Zip Code:
Phone No:	Fax No.	
Name 3:	Contact:	
City:	State:	Zip Code:
Phone No:	Fax No.	

I hereby authorize our banks, trades, and personal credit bureaus to release credit information to Intergulf Corporation and/or its assignees.

Signature:	Date:
Print Name:	Title:

FOR IGC OFFICE USE

IGC Sales Representative:		
Credit Approved By:	Approved Credit Limit Amount: \$ _____, _____.	Date: _____/_____/_____
Credit Denied By:	Reason(s):	
Credit Manager's Signature:		