



APPLICATION FOR CREDIT

Name of Firm or Individual			
Address		Years at this address	
City	State	Zip	Phone () -

Engineering Repro Systems Inc

3005 Ranchview Lane North

Plymouth MN 55447

(763) 694-5900 Fax (763) 694-0376

N/30

Our Normal Credit Terms

The following information must be provided. It will be held in the strictest confidence.

<input type="checkbox"/> Corporation	<input type="checkbox"/> Incorporated within the last 12 months	<input type="checkbox"/> Partnership	<input type="checkbox"/> Individual
1. Name (s) of Principal(s)	Address	Zip	() - Phone
2.			() - Phone
3.			() - Phone
4.			() - Phone

_____ Bank

_____ Bank Address

_____ Bank Officer or Department

_____ Phone

We certify that all the information on this form is correct. We fully understand your credit terms and agree to the proper payment in consideration of extended credit.

Signed _____

Date: _____

Title _____