



Credit Application

Billing purposes only: Account # _____ Contract # _____ Approval Signature _____

Type of Business (circle one): Corporation Individual Partnership Limited Partnership

Full Legal Name _____ How Long in Business? _____

Doing Business as _____ Location Address _____

Tax ID # _____ Billing Address _____

Social Security # _____ Billing Phone # _____

Officers:

Name _____ Title _____ Phone # _____

Name _____ Title _____ Phone# _____

Name _____ Title _____ Phone# _____

Credit References:

1) Vendor Name _____ Acct # _____

Address, City and State _____ Phone# _____

2) Vendor Name _____ Acct# _____

Address, City and State _____ Phone# _____

3) Vendor Name _____ Acct# _____

Address, City and State _____ Phone# _____

Bank Information:

Name _____ Acct# _____ (or attached voided check)

AUTHORIZATION/TERMS AND CONDITIONS

The undersigned certifies this application is for credit and authorizes Bay Disposal or its assignee to investigate all information contained herein. The undersigned authorizes and requests all parties to release any information requested concerning personal or business credit standing.

Applicant _____ **Print Name & Title** _____ **Date** _____

Personal Guaranty

In order to induce Bay Disposal to extend credit to Applicant, the undersigned does hereby absolutely, unconditionally and personally guarantee to Bay Disposal the payment of all indebtedness and performance of all obligations of whatever nature of the above Applicant to Bay Disposal as they come to be due or accelerated whether such indebtedness and obligations exist on the date of this instrument or are incurred after such date.

Applicant _____ **Print Name & Title** _____ **Date** _____