



2501 N Harwood, #2600, Dallas, TX 75201
Phone(214) 269-5344 Fax(469) 249-9330

APPLICATION FOR CREDIT

NAME OF BUSINESS: _____

BILLING ADDRESS: _____

STREET ADDRESS: _____ YRS IN BUSINESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: () _____ - _____ CONTACT: _____

FAX: () _____ - _____ A/P EMAIL: _____

TYPE OF BUSINESS: _____ D&B Number: _____

IF BRANCH OR DIVISION, LOCATION OF HOME OFFICE:

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

ARE PURCHASE ORDERS REQUIRED? YES ___ NO ___

PERSON TO CONTACT REGARDING ACCOUNTS PAYABLE: _____

AMOUNT OF CREDIT REQUESTED: \$ _____

ANTICIPATED MONTHLY VOLUME WITH BEDROCK: \$ _____

PLEASE ATTACH CURRENT OPERATING STATEMENT.

BANK REFERENCE	ACCOUNT #	ADDRESS	TELEPHONE
1. _____	_____	_____	_____

CURRENT TRUCKING REFERENCES:

NAME	ADDRESS	TELEPHONE #	FAX #
1. _____	_____	_____	_____
2. _____	_____	_____	_____

CURRENT TRADE REFERENCES:

NAME	ADDRESS	TELEPHONE #	FAX #
1. _____	_____	_____	_____
2. _____	_____	_____	_____

I (We) understand that the information furnished hereof, is for the purpose of obtaining credit from your firm. That I am (we are) authorized, in my (our) capacity, to bind my (our) firm accordingly. That all accounts or monies due you shall be due and payable at your place of business, Dallas, Dallas County, Texas. That all past due accounts, notes or judgments may draw interest at the highest rate permitted by law.

SIGNATURE DATE

Amount of credit approved: \$ _____ (to be signed by Credit Mgr)