



**PLEASE FAX BACK TO (253) 286-5115**

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**Business Account [Credit Application]**

**COMPANY CONTACT INFORMATION**

Business Name: \_\_\_\_\_

TAX ID: \_\_\_\_\_ UBI Number: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Business Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Year Business Started: \_\_\_\_\_

Sole Proprietorship:  LLC:  Corporation:  Other:

**CREDIT AND BUSINESS INFORMATION**

Owner's Name (1): \_\_\_\_\_ Owner's Name (2): \_\_\_\_\_

Owner's Name (3): \_\_\_\_\_

How long at current address? \_\_\_\_\_ Years \_\_\_\_\_ Months

Number of years of business: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Gross Monthly Cash Flow: \_\_\_\_\_

**PERSONAL GUARANTOR INFORMATION**

Full Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Drivers License Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

How long at current address? \_\_\_\_\_ Years \_\_\_\_\_ Months

Monthly Gross Income: \_\_\_\_\_ Monthly Mortgage Payment: \_\_\_\_\_

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_