

INSTRUCTIONS FOR SUBMITTING A CREDIT APPLICATION

- 1) Print this file (instruction sheet and two pages of Credit Application)
- 2) Complete and sign page 1 of the application
- 3) Complete page 2 or include your pre-printed bank/trade reference sheet
- 4) Scan and email the two-page Credit Application to support@merchant-general.com or fax to (813) 818-1932. If you prefer, you can mail it to the address below.

NOTE: Page one of the Credit Application MUST be completely filled out and signed.

A Credit Department representative will contact your organization within 24 hours of processing. Thank you!

Mailing Address: Merchant General Corporation

Attn: Credit Department

PO Box 1748

Safety Harbor, FL 34695



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Credit Account Application

Please type or print clearly.	
Company Name:	Application Reference Code:
Primary Contact Person:	
Telephone:	Email:
Main Business Address:	Billing Address:
	A/P Contact:
	Telephone:
FEIN:	Email:
(Federal Tax ID Number)	Fax:
Ship Orders To:	Shipping Carrier and Account Number:
	(Optional)
CREDIT LIMIT REQUESTED:	APPROVED BY/DATE:
Persons Authorized to Order:	Please provide bank and trade references (3) with this application.
	Sales tax will be collected on all orders shipped to Florida addresses unless a Florida tax exempt certificate is provided prior to ordering.
	tted by email, fax, or mail for each order placed. Payment is due upon from invoice date) will be charged a 1.5% per month service fee.
Authorized	Date



Credit Account Application

Company Name:	Year Established:
Type of Business:	D&B Number:
Parent Company (if any):	
Bank Reference:	
Bank Name:	Telephone:
Contact:	Account:
Trade Reference:	
Company Name:	
Contact:	
Telephone:	
Trade Reference:	
Company Name:	
Contact:	
Telephone:	
Trade Reference:	
Company Name:	
Contact:	
Telephone:	