



GUTCHECK INDICATORS, LLC 4196 Merchant Plaza #811 • Woodbridge, VA 22192 • 877-488-0804

# Dealer Credit Application

Company Name \_\_\_\_\_ ID# (i.e. FID# in the US) \_\_\_\_\_

Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip \_\_\_\_\_

Corporation     LLC     Partnership     Proprietorship

### BANK REFERENCE

Bank \_\_\_\_\_ Branch \_\_\_\_\_

Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

Contact \_\_\_\_\_ Email \_\_\_\_\_  Checking  Loan  Savings

Bank \_\_\_\_\_ Branch \_\_\_\_\_

Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

Contact \_\_\_\_\_ Email \_\_\_\_\_  Checking  Loan  Savings

### TRADE REFERENCE

Name	City & State/Province	Contact	Email	Fax #	Phone
_____	_____	_____	_____	(____) _____	(____) _____
_____	_____	_____	_____	(____) _____	(____) _____
_____	_____	_____	_____	(____) _____	(____) _____
_____	_____	_____	_____	(____) _____	(____) _____
_____	_____	_____	_____	(____) _____	(____) _____
_____	_____	_____	_____	(____) _____	(____) _____

I authorize the above bank and business references to give any and all necessary information to which will assist you in your credit inquiry. I release any claim I have fore breach of contract or invasion of privacy because of information furnished. This application is given for the purpose of obtaining credit. In the event of any material change in our financial condition, we will notify you immediately in writing.

Name (print) \_\_\_\_\_ Signature \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Title \_\_\_\_\_

**PLEASE EMAIL TO: [info@gutcheckindicators.com](mailto:info@gutcheckindicators.com)**