

Source Direct Plastics, Inc.

2200 Garry Road Suite 3 Cinnaminson, NJ 08077

Ph: 856-768-7445 Fax: 856-768-7544 Email: sales@sourcedirectinc.com

CREDIT APPLICATION

Date: _____

For the purpose of obtaining merchandise from Source Direct Plastics, Inc, please fill out this statement and return it to our controller.

Company Name: _____ Phone: _____ Fax: _____

Bill to Address: _____ Ship to Address: _____

Type of Business: _____ Duns Number: _____

Notes:

Years in Business: Proprietor: Partnership: Corporation:

*Note: NJ Customers **MUST** submit a valid NJ Sales Tax Exemption Certificate, or sales tax will be charged to each order.*

Principals or Officers of the Firm: _____ Title: _____

Bank References:

Bank Name: _____

Address: _____ Phone: _____

Fax: _____

Supplier References:

Company Name: _____

Contact: _____ Phone: _____

Email Address: _____ Fax: _____

Supplier References:

Company Name: _____

Contact: _____ Phone: _____

Email Address: _____ Fax: _____

Supplier References:

Company Name: _____

Contact: _____ Phone: _____

Email Address: _____ Fax: _____