imagecraft
full service production rentals

CREDIT APPLICATION

Your Company Name: _____

Contact Name: _____ Email: _____

Accounting Contact: _____ Email: _____

Billing Address: _____

Phone: _____ Fax: _____

Imagecraft requires that you fill out the following information including two references, bank information, and a credit card authorization in order to set your company on credit terms.

Reference #1:

Name: _____

Address: _____

Phone: _____ Fax: _____

Reference #2:

Name: _____

Address: _____

Phone: _____ Fax: _____

Bank Information:

Bank Name: _____

Address: _____

Account #: _____ Contact: _____

Billing Address: _____

Applicant's Signature: _____

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Internal Use Only:

Estimated Order Amount: _____

Company Info Verified: ☐ SOS ☐ IS	Executed Rental Agreement: ☐	Initials: _____
Ref 1: ☐ Excellent ☐ Good ☐ Fair ☐ Poor	Completed Credit Card Auth: ☐	Initials: _____
Ref 2: ☐ Excellent ☐ Good ☐ Fair ☐ Poor	Copy of ID and Credit Card: ☐	Initials: _____
Bank Verified: ☐ Initials: _____	Certificate of Insurance: ☐	Initials: _____