



Torstenson Glass Co.
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 www.tglass.com
flat glass processors & distributors since 1889

COMMERCIAL CREDIT APPLICATION

APPLICATION INFORMATION

Date: _____

Company Name: _____

Address: _____

Type of Business:

City, State, Zip: _____

Sole Proprietorship _____

Phone: _____ Fax: _____

Partnership _____

E-Mail: _____

Corporation _____

Number of years in business: _____ Resale No.: _____

Individual _____

OWNERSHIP INFORMATION

Name of Owner: _____ Phone: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Name of Owner: _____ Phone: _____

Home Address: _____ City: _____ State: _____ Zip: _____

TRADE REFERENCE

Company Name: _____ Phone: _____

Address: _____ Fax: _____

City, State, Zip: _____

Company Name: _____ Phone: _____

Address: _____ Fax: _____

City, State, Zip: _____

Company Name: _____ Phone: _____

Address: _____ Fax: _____

City, State, Zip: _____

BANK REFERENCE

Bank Name: _____ Phone: _____

Address: _____ Contact: _____

Approved: _____ Date: _____ Credit Limit: _____ Customer Type: _____ Account: _____

Yes ___ No ___ _____