

CREDIT APPLICATION

(Confidential)

DATE _____

TO

FROM

DALOR TRANSIT INC.
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FRANKLIN, WI 53132
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TYPE OF OWNERSHIP

PARTNERSHIP INDIVIDUAL CORPORATION-STATE OF _____

PRINCIPAL OWNER _____

NUMBER OF YEARS IN BUSINESS _____ D & B NUMBER _____

CONTACT REGARDING CREDIT AND PAYMENT _____

BANK REFERENCES

1	NAME OF BANK	ADDRESS	TELEPHONE
	TYPE OF ACCOUNT	CONTACT	TITLE
2	NAME OF BANK	ADDRESS	TELEPHONE
	TYPE OF ACCOUNT	CONTACT	TITLE
3	NAME OF BANK	ADDRESS	TELEPHONE
	TYPE OF ACCOUNT	CONTACT	TITLE

TRADE REFERENCES

1	NAME OF COMPANY	ADDRESS	TELEPHONE
	TYPE OF BUSINESS	CONTACT (Name/Title)	ANNUAL AMOUNT
2	NAME OF COMPANY	ADDRESS	TELEPHONE
	TYPE OF BUSINESS	CONTACT (Name/Title)	ANNUAL AMOUNT
3	NAME OF COMPANY	ADDRESS	TELEPHONE
	TYPE OF BUSINESS	CONTACT (Name/Title)	ANNUAL AMOUNT
4	NAME OF COMPANY	ADDRESS	TELEPHONE
	TYPE OF BUSINESS	CONTACT (Name/Title)	ANNUAL AMOUNT

NAME _____ TITLE _____ SIGNATURE _____