

Credit Application

MI - IN - KY - NC - OH - PA - SC - TN - WI

The Macomb Group Corporate Headquarters 6600 East 15 Mile Road Sterling Heights, MI 48312 TEL: 586.274.4100 FAX: 586.274.4125 www.macombgroup.com

Company Name:	Date:
Street Address:	
Mailing Address:	
City:	State: Zip:
Phone Number:	Fax Number:
Accounts Payable Email:	AP Phone#:
Check One: () Corporation () Parti	nership () Sole Proprietorship () LLC
(If No, please attach tax exempt certificate)	ID#: DNB#:
Principal Suppliers:	
Company Reference:	Year Acct. Opened:
Street Address:	City: State:
Zip: Phone Number:	Fax Number:
Company Reference:	Year Acct. Opened:
	City: State:
Zip: Phone Number:	Fax Number:
Company Reference:	Year Acct. Opened:
Street Address:	City: State:
Zip: Phone Number:	Fax Number:
Bank Information:	
Bank Name:	Phone:
Street:	
City:	State: Zip:
Officer:	Account Number:
Please Note: OUR TER	RMS 1% 10 DAYS NET 30 DAYS
For Internal Use Only:	Salesman #:
Sales Territory:	— Default Location:
Cust Type Code:	Customer Code:
Credit Limit:	Price Matrix ID:
Approved by:	