



REILLY INTERNATIONAL CREDIT APPLICATION

COMPANY NAME		
ADDRESS STREET	CITY	POSTAL CODE
BILLING ADDRESS	CITY	POSTAL CODE
DEPARTMENT NAME AND TITLE OF CONTACT PERSON		
AREA CODE	TELEPHONE NUMBER	AMOUNT OF CREDIT REQUESTED
NUMBER OF YEARS IN BUSINESS		COMPANY REGISTRATION NUMBER
LIMITED COMPANY <input type="checkbox"/> YES <input type="checkbox"/> NO		
NAMES OF PRINCIPALS OR OFFICERS:		
NAME	TITLE	
NAME	TITLE	
NAME	TITLE	
AFFILIATED COMPANIES SUBSIDIARIES (IF ANY)		
NAME	STREET	CITY POSTAL CODE
TRADE CREDIT REFERENCES		
NAME OF COMPANY / CONTACT	ADDRESS	FAX NUMBER
NAME OF COMPANY / CONTACT	ADDRESS	FAX NUMBER
NAME OF COMPANY / CONTACT	ADDRESS	FAX NUMBER
BANKING REFERENCES (Kindly submit your latest financial statement)		
NAME / ADDRESS / BRANCH MANAGER		ACCOUNT NUMBER
TELEPHONE NUMBER	FAX NUMBER	CONTACT NAME
HAS THE OWNER OR ANY PRINCIPAL EVER FILED PERSONALLY FOR BANKRUPTCY? <input type="checkbox"/> YES <input type="checkbox"/> NO		
ARE EITHER OF THE ABOVE DEFAULT OF ANY LOANS OR OBLIGATION? <input type="checkbox"/> YES <input type="checkbox"/> NO		
HAS THE COMPANY EVER FILED FOR BANKRUPTCY? <input type="checkbox"/> YES <input type="checkbox"/> NO		
IS THE COMPANY CURRENTLY IN DEFAULT OF ANY LOANS OR OBLIGATION? <input type="checkbox"/> YES <input type="checkbox"/> NO		
IF YES TO ANY OF THE ABOVE, PLEASE EXPLAIN.		
<p>IN CONSIDERATION FOR EXTENSION OF CREDIT, DEBTOR AGREES TO TERMS OF 30 DAYS AND IN THE EVENT CREDITOR BRINGS SUIT ON ANY DEBT OWED BY DEBTOR, THE CREDITOR SHALL BE ENTITLED TO RECOVER, IN ADDITION TO THE AMOUNT OF THE DEBT, ITS COSTS AND LEGAL FEES. ALL BUSINESS UNDERTAKEN IS SUBJECT TO TERMS AND CONDITIONS ON REVERSE.</p> <p>ANY DEBT OUTSTANDING AFTER 30 DAYS SHALL BE SUBJECT TO A 1.5% INTEREST FEE PER EACH 30 DAYS OUTSTANDING.</p>		
SIGNATURE OF OFFICER		DATE
PRINT OFFICER NAME AND TITLE		