



CREDIT APPLICATION

Zircar Zirconia, Inc.

P.O. Box 287

Florida, NY 10921-0287

Tel: (845) 651-3040 Fax: (845) 651-0074

Email: sales@zircarzirconia.com

Your company has requested credit with Zircar Zirconia, Inc. Please complete this form and mail or fax back to the above address.

Company Information:

Company Name: _____

Contact: _____

Title: _____

Billing Address: _____

Phone: _____

Fax: _____

Nature Of Business: _____

Shipping Address: _____

Duns #: _____

If Subsidiary, Name & Address of Parent: _____

Incorporated: Yes No

Federal ID#: _____

Year Incorporated: _____

State Incorporated: _____

Credit Requested: \$ _____

Trade References: Include three U.S. Firms with which you have done business for more than one year.

Company: _____

Contact Name: _____

Address: _____

Title: _____

Phone / Fax: _____

Company: _____

Contact Name: _____

Address: _____

Title: _____

Phone / Fax: _____

Company: _____

Contact Name: _____

Address: _____

Title: _____

Phone / Fax: _____

Bank Reference: _____

Contact Name / Title: _____

Address: _____

I, THE UNDERSIGNED, CERTIFY THAT:

The above information is correct and I am applying for credit with Zircar Zirconia, Inc. I understand that Zircar Zirconia, Inc. will conduct a credit investigation and will contact trade the references supplied above, as well as utilizing reports from outside agencies. The signor certifies that they have read the attached Terms and Conditions and are authorized commit the above named applicant to these terms.

Name(Print): _____

Title: _____

Signature _____

Date: _____