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PASADENA, TX 77503
800-444-4CEP
713-921-7900
FAX 713-921-7967

CREDIT APPLICATION

NAME & BILLING ADDRESS

_____
_____
_____

SHIPPING ADDRESS

_____
_____
_____

PHONE NUMBER _____ FAX _____

OWNER/PRINCIPALS _____

D&B NUMBER _____

BANK INFORMATION

ADDRESS _____
_____
_____

PHONE # _____

OFFICER _____

TRADE REFERENCES/VENDORS

(1) _____
PHONE_____
FAX _____
CONTACT_____

(2) _____
PHONE_____
FAX _____
CONTACT_____

(3) _____
PHONE_____
FAX _____
CONTACT_____

(4) _____
PHONE_____
FAX _____
CONTACT_____

******PLEASE FAX A COPY OF YOUR RESALE TAX CERTIFICATE******

_____ _____ _____
AUTHORIZED SIGNATURE TITLE DATE