



## CREDIT APPLICATION FOR BUSINESS ACCOUNT

### BUSINESS CONTACT INFORMATION

Company Name:	Year Established:	FEIN:
<b>Primary Contact:</b>	Title:	
Mailing Address:		
Phone:	Fax:	Email:
<b>Billing Contact:</b>	Title:	
Billing Address:		
Phone:	Fax:	Email:
Organization Structure:	Sole Proprietorship	Partnership Corporation Other:

### BUSINESS & CREDIT INFORMATION

Physical Address:		
City:	State:	ZIP Code:
How Long At Current Address?	Are You Exempt From Sales Tax?	If Yes:
Telephone:	Fax:	Email:
Bank Name:		
Bank Address:	Phone:	
City:	State:	ZIP Code:
Type Of Account	Account Number	

### BUSINESS/TRADE REFERENCES

#### Reference #1

Company Name:		
Address:		
City:	State:	ZIP Code:
Phone:	Fax:	Email:
Type of account:		

#### Reference #2

Company Name:		
Address:		
City:	State:	ZIP Code:
Phone:	Fax:	Email:
Type of account:		

#### Reference #3

Company Name:		
Address:		
City:	State:	ZIP Code:
Phone:	Fax:	Email:
Type of account:		



## DOCUMENTS

Along with this form completed in its entirety, please email any additional/supporting documents to:  
[Support@ZebraInstruments.com](mailto:Support@ZebraInstruments.com)

SUBJECT: (COMPANY NAME) – BUSINESS CREDIT APPLICATION

Additional documents may include but are not limited to: Tax Exempt Form, Credit Profiles, etc.

## AGREEMENT

**The undersigned individuals authorize inquiry into credit information. We further acknowledge that credit privileges, if granted, may be withdrawn at any time.**

---

**Signature**

---

**Title**

---

**Date**

---

**Signature**

---

**Title**

---

**Date**