

CREDIT APPLICATION

GENERAL INFORMATION

Name ▶	Phone ▶
Address ▶	Fax ▶
City ▶	Postal Code ▶
Credit limit requested amount ▶	Contact ▶
Accounts payable responsible ▶	

FINANCIAL INSTITUTION

Name ▶	Phone ▶
Address ▶	Fax ▶
City ▶	Postal Code ▶
Account Number ▶	Contact ▶

SUPPLIERS (VERY IMPORTANT TO PROVIDE US WITH **3** OF YOUR PRINCIPAL SUPPLIERS)

Name ▶	Phone ▼	Fax ▼
Address ▶		
City ▶	Postal Code ▶	Contact ▶

Name ▶	Phone ▼	Fax ▼
Address ▶		
City ▶	Postal Code ▶	Contact ▶

Name ▶	Phone ▼	Fax ▼
Address ▶		
City ▶	Postal Code ▶	Contact ▶

GPM Ripe inc. is hereby authorized to obtain information it considers necessary to process this credit application. The undersigned has authorized its bank to respond to our credit inquiries. By signing this request, I/we consent to pay the purchase price of goods and services within a period of thirty (30) days from the invoice date. The undersigned agrees to pay interest on overdue accounts at 24% per year or 2% per month.

Signature ▶ _____ Title ▶ _____ Date ▶ _____

Note: All above-mentioned information will serve to the credit department and will be kept in all confidentiality.