

HORWITH TRUCKS INC.

APPLICATION FOR CREDIT

Please print, fill out and fax to 610-261-2916

Name _____ EIN # _____

Address _____

City, State, Zip Code _____

Telephone _____ Email _____

Horwith Trucks Inc.
PO Box 7
Northampton, PA 18067
Phone: (610) 261-2220
Fax: (610) 261-2916

Credit Manager: Lori Lindenmuth
Email: loril@horwithfreightliner.com

Terms: Net 30

Please Check One:

____ Corporation ____ Partnership ____ Individual ____ LLC

Do you require PO numbers? _____

Are you sales tax exempt? _____ If yes, please send tax exemption certificate with application.

Ownership

Name of Principal _____

Finance

Bank Name _____ Phone _____

Bank Officer _____

Business References (established accounts)

Phone _____

Phone _____

Phone _____

Sign _____

Date _____