



36 West 47th Street, Suite 1206 New York, NY 10036 Phone # (212) 944-5776 Fax # (888) 269 9029
customerservice@pafcocasting.com

Company Identification

Company Identification

Business Name * _____
Country or Region * _____
Address - Primary Street (No P.O. Boxes) * _____
City * _____
State/Province * _____
Zip/Postal Code * _____
Company Phone * _____
D-U-N-S Number _____
Is the Shipping Address the same as the Primary? * _____

Shipping Address

Shipping Address

Shipping Address * _____
Shipping City * _____
Shipping State * _____
Shipping Zip Code * _____

Company Information

Contact Information

Contact First Name _____
Contact Last Name _____
Contact E-mail Address * _____

Request

Requested Amount _____
Request over \$5,000? (Personal Guarantee Required) * _____

Trade and Bank References

Please provide at least 3 Trade References. Please only list trade references that you have conducted business in within the last 90 days.

Trade and Bank References

Reference Business Name* _____
Country or Region _____
Street Address _____
City _____

State/Province* _____
Province/State* _____
Zip Code _____
Phone Number* _____
Contact Name* _____
Contact Email* _____

Guarantor

Personal Guarantee section is not required for any credit applications below \$5,000. To be considered for any amount above that you must fill out and agree to our Personal Guarantee section.

Guarantor

Guarantor First Name* _____
Guarantor Last Name * _____
Social Security Number * _____
Street Address* _____
City / Town* _____
State/Province* _____
ZIP Code / Postal Code* _____
Phone Number* _____
Driver's License #* _____
E-mail Address* _____
Percent of Business Owned _____
Personal Net Worth _____
Personal Annual Income _____

Bank Information

Bank Information

Bank Name * _____
Bank Account Number * _____
Bank Address * _____
Bank Phone Number * _____
Has your bank changed in the last 3 years? * _____

Bank 2

Bank 2

Bank Name * _____
Bank Account Number * _____
Bank Address * _____
Bank Phone Number * _____

Terms and Conditions

By clicking submit below, I hereby represent that I am authorized to submit this application and bind the business identified in this application, and that the information provided is for the purpose of obtaining credit and is warranted to be true.

The business identified in this application acknowledges that this request is for the extension of credit for commercial purposes only and is not intended for the extension of credit for personal, family or household purposes. In order to protect individual identities, unless an individual is intending to act as a guarantor for purposes of securing credit and is required to provide guarantor information on this application, no personally identifying information (i.e. Social Security #, drivers license #, bank account information, etc.) should be provided.

In the event that the business identified in this application is/are individual(s), a partnership or is a Limited Liability Company, the acceptance of this credit application shall constitute authorization under the Fair Credit Reporting Act in 15 U.S.C @1681 et. Seq. for Pafco Jewelry, Inc. to utilize consumer credit reporting agencies to provide reports on said individual(s), partners or members in order to permit Pafco Jewelry, Inc. to appropriately evaluate the extension of any commercial credit to the business identified in this application. The individual/ business submitting this application is

authorized to grant permission to access consumer credit reports on said individual(s), partners or members.

The business identified in this application hereby authorizes all banks, financial institutions, trade reference sources, credit reporting agencies and others to release credit information.

In the event of a conflict, the terms and conditions set forth above shall control over any terms and conditions set forth below.

I agree to the terms and conditions above

Name

Email

Signatures

Authorized Signature

Professional Title
