



**John  
BOOS**  
Since 1887

*John Boos & Co.*  
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**CONFIDENTIAL CUSTOMER CREDIT APPLICATION**

Legal Name of Business: \_\_\_\_\_  
Trade Style Name (if different from legal name): \_\_\_\_\_  
Address of Business: \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_  
Years in Business: \_\_\_\_\_ Financial Statement: Attached \_\_\_\_\_ Will Send \_\_\_\_\_  
Ownership: Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Proprietorship \_\_\_\_\_

**Principal Owners or Stockholders:**

Name	Street Address	City, State, Zip
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Bank References:** (At least one complete bank reference is required.)

Name	Mailing Address	Account Number
_____	_____	_____
_____	_____	_____

**Trade References:** ( 6 complete trade references are required.) PLEASE INCLUDE FAX NUMBERS!

Company Name	1. _____	4. _____
Mailing Address	_____	_____
City, State, Zip	_____	_____
Phone Number	_____	_____
Fax Number	_____	_____
E-Mail Address	_____	_____
Company Name	2. _____	5. _____
Mailing Address	_____	_____
City, State, Zip	_____	_____
Phone Number	_____	_____
Fax Number	_____	_____
E-Mail Address	_____	_____
Company Name	3. _____	6. _____
Mailing Address	_____	_____
City, State, Zip	_____	_____
Phone Number	_____	_____
Fax Number	_____	_____
E-Mail Address	_____	_____

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date