

**Summit Aviation, Inc.**  
**Credit Application for a Business Account**

Forward to Summit Aviation, Inc. - 4200 Summit Bridge Rd. - Middletown, DE 19709 - Fax 302-378-7035

**Business Contact Information**

Title:	DUNS #:	EIN #:
Company name:		
Phone:	Fax:	E-mail:
Registered company address:		
City:	State:	ZIP Code:
Date business commenced:		
Sole proprietorship:	Partnership:	Corporation: Other:

**Business and Credit Information**

Primary business address:		
City:	State:	ZIP Code:
How long at current address?		
Telephone:	Fax:	E-mail:
Bank name:		
Bank address:	Phone:	
City:	State:	ZIP Code:
account	Account number	
Savings		
Checking		
Other		

**Business/trade references**

Company name:		
Address:		
City:	State:	ZIP Code:
Phone:	Fax:	E-mail:
Type of account:		
Company name:		
Address:		
City:	State:	ZIP Code:
Phone:	Fax:	E-mail:
Type of account:		
Company name:		
Address:		
City:	State:	ZIP Code:
Phone:	Fax:	E-mail:
Type of account:		

**Agreement**

1. All invoices are to be paid 30 (thirty) days from the date of invoice.
2. Claims arising from invoices must be made within seven (7) working days
3. By submitting this application, you authorize Summit Aviation, Inc. to make inquiries into the banking and business/trade references that you have supplied.

**Signatures**

Printed Name & Title	Signature & Date
_____	_____
_____	_____