

## ARC / Washington Accounting Department

5869 S. 194th St. #102 - Kent, WA 98032 **Tel:** 253-395-3568 - **Fax:** 253-395-3598

Email: kent.accounting@e-arc.com

ADMINISTRATIVE OFFICES ONLY						
Approved By		Yes		No		
Sales Rep:						
Special Pricing						

	Арј	plication for	Comme	ercial Cred	dit	
Business/Corp. Name					Application Date	
Billing Address			Deliver	y Address		
City	State	Zip	City		State	Zip
Phone # Fax #		ars Established Current Location	Taxa Busir	ble? ness Type		Employees
We are in the business of:		Estimated Vo	olume-Month		Credit Line Request	ed
Contact Person			Title		Phone Number	
Owners: (if Applicant is S	Sole Proprietor or	Partnership)	Officers	(if Applicant is	s a Corporation)	
Name	Title		Home Addr	ress		
Social Security Number			City		State Zip Co	ode
Name	Title		Phone Num	ıber		
Social Security Number			Home Addr	ress		
Name	Title		City		State Zip Co	ode
Social Security Number			Phone Num	ıber		
Tundo Dofovoroso						
Trade References:	(Please Use Loca	I References When		dress		
Phone	- Fmail				Chaha	7:2
	Email		City	,	State	Zip
Name				dress		
Phone	Email		City	y	State	Zip
Name			Add	dress		
Phone	Email		City	у	State	Zip
Name			Add	dress		
Phone	Email		City	у	State	Zip

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Bank or Savings & Loan A	ssociation:				
Bank Name		Address			
Branch		City		State	Zip Code
Bank Contact		Phone Nun	nber		
Account Type(s)	Account Number(s)				
I hereby certify that the information abov exceeded or falls deliquent to agreed upounpaid beyond 30 days.		•	•	•	
In addition, I understand that ARC / Wash first of each month), within fifteen days of If at some point, ARC / Washington is force	freceipt of statement. A	After fifteen to collect thi	days, all items or s account, I unde	the statement was transfered that I am	will be considered final. liable for
reasonable attorney's and collections fees now applying for credit change ownershi					
Signature Field					