

BUSINESS CREDIT APPLICATION

AFAST Robotics Inc.
969 34th Street N
Fargo, ND 58102
701-237-4077
www.afastrobotics.com



For fast credit approval fax to:
701-232-1929
Attn: Credit Dept

_____ Company Name			_____ Phone			_____ Fax		
_____ Billing Address			_____ Shipping Address					
_____ City State Zip			_____ City			_____ State Zip		
Type of Entity: ____Corporation ____Partnership ____Sole Proprietor ____Other_____						State of Organization: _____		
Years in business: _____			Tax Exempt? ____Yes ____No (if yes, complete sales tax exempt certificate)					

_____ Parent Company Name (if different than above)			_____ Type of business					
_____ Address			_____ City			_____ State Zip		

BANK REFERENCES

1. _____								
Bank Name			Phone			Fax		
_____ Checking Account #			_____ Savings Account #			_____ Contact Name		
2. _____								
Bank Name			Phone			Fax		
_____ Checking Account #			_____ Savings Account #			_____ Contact Name		

SIMILAR VENDOR REFERENCES

1. _____								
Name			Phone			Fax		
_____ Address			_____ City			_____ State Zip		
2. _____								
Name			Phone			Fax		
_____ Address			_____ City			_____ State Zip		
3. _____								
Name			Phone			Fax		
_____ Address			_____ City			_____ State Zip		

I HEREBY STATE THAT ALL INFORMATION PROVIDED IS TRUE AND ACCURATE. IF SO REQUESTED FARGO AUTOMATION MAY CONTACT MY CREDITORS LISTED IN ORDER TO ESTABLISH AN OPEN CREDIT ACCOUNT. MUST BE SIGNED BY AN AUTHORIZED REPRESENTATIVE.

AUTHORIZED SIGNATURE: _____ **DATE:** _____

PRINT NAME: _____ **TITLE:** _____

Inter Office Use Only
APPROVED _____ DECLINED _____ BY: _____ DATE: _____