

# VINA DISTRIBUTING

Sales • Service • Leasing  
635 South Raymond Ave.  
Fullerton, California 92831  
(714) 447-8462 • Fax (714) 447-9188

Credit Line Requested: \_\_\_\_\_ SIC Code \_\_\_\_\_

Legal Business Name \_\_\_\_\_ Business Phone \_\_\_\_\_ Fed. I.D. # \_\_\_\_\_

DBA \_\_\_\_\_ Type of Business \_\_\_\_\_ Date Established \_\_\_\_\_

Business Address \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Corporate Officers President \_\_\_\_\_ Vice President \_\_\_\_\_ Sec/Tres \_\_\_\_\_

Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Sole Proprietorship \_\_\_\_\_ # Routes \_\_\_\_\_ # Locations \_\_\_\_\_ # Units \_\_\_\_\_

Landlord/Mortgage Holder \_\_\_\_\_ City/State \_\_\_\_\_ # Years \_\_\_\_\_ Telephone # \_\_\_\_\_

Owners Name \_\_\_\_\_ Phone # \_\_\_\_\_ Social Security # \_\_\_\_\_ Birth Date \_\_\_\_\_

Owner's Address \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Co-Applicant \_\_\_\_\_ Phone # \_\_\_\_\_ Social Security # \_\_\_\_\_

## EMPLOYMENT INFORMATION (if employed outside business or in business less than 5 years)

Name of Employer \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Gross Income \_\_\_\_\_

Position \_\_\_\_\_ Date Employed \_\_\_\_\_ Contact \_\_\_\_\_

Previous Employer \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Gross Income \_\_\_\_\_

Position \_\_\_\_\_ Date Employed \_\_\_\_\_ Contact \_\_\_\_\_

Other Income \_\_\_\_\_ Telephone # \_\_\_\_\_ Contact \_\_\_\_\_

Nearest Relative (not living with applicant) \_\_\_\_\_ Relationship \_\_\_\_\_ Phone # \_\_\_\_\_

## BANK REFERENCES: Business/Personal

Checking Bank \_\_\_\_\_ City/State \_\_\_\_\_ Telephone # \_\_\_\_\_ Acct. # \_\_\_\_\_

## LOAN REFERENCES: Business/Personal

Bank \_\_\_\_\_ City/State \_\_\_\_\_ Telephone # \_\_\_\_\_ Acct. # \_\_\_\_\_

Bank \_\_\_\_\_ City/State \_\_\_\_\_ Telephone # \_\_\_\_\_ Acct. # \_\_\_\_\_

Landlord/Mortgage \_\_\_\_\_ City/State \_\_\_\_\_ Telephone # \_\_\_\_\_ Acct. # \_\_\_\_\_

## TRADE REFERENCES: Business/Personal

Name \_\_\_\_\_ City/State \_\_\_\_\_ Telephone # \_\_\_\_\_ Acct. # \_\_\_\_\_

Name \_\_\_\_\_ City/State \_\_\_\_\_ Telephone # \_\_\_\_\_ Acct. # \_\_\_\_\_

Name \_\_\_\_\_ City/State \_\_\_\_\_ Telephone # \_\_\_\_\_ Acct. # \_\_\_\_\_

Buyer authorizes Seller to obtain such information as required concerning the statements contained in the above application for credit, and agrees that the application shall remain the Seller's property, is presented for approval only that final acceptance or rejection rest solely with the Seller and should Seller reject the application, Seller has no obligation to Buyer.

VINA DISTRIBUTING  
635 South Raymond Avenue  
Fullerton, CA 92831

(714) 447-8462 Fax: (714) 447-9188

Sales Representative \_\_\_\_\_

Buyer \_\_\_\_\_

Date \_\_\_\_\_