

# Rubbing Hands™

Games, fun, and more fun.

PO Box 929  
Georgetown, CT 06829  
ph: (203) 341-0401 fax: (203) 428-4234

## Credit Application

Legal name of applicant: \_\_\_\_\_  
Trade name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Nature of Business: \_\_\_\_\_  
How long has company been in business: \_\_\_\_\_  
Sole proprietorship: \_\_\_\_\_ Partnership: \_\_\_\_\_ Corporation: \_\_\_\_\_  
Credit Limit Required: \_\_\_\_\_  
Dunn and Bradstreet Number: \_\_\_\_\_

### Names of Owners, Partners, or Officers of the Company:

Name and position: \_\_\_\_\_  
Name and position: \_\_\_\_\_  
Accounts payable contact: \_\_\_\_\_  
Bank name: \_\_\_\_\_ Contact: \_\_\_\_\_  
Bank address: \_\_\_\_\_ Account number: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

### Trade References:

1. Reference: \_\_\_\_\_ Phone: \_\_\_\_\_  
Contact: \_\_\_\_\_ Fax: \_\_\_\_\_  
2. Reference: \_\_\_\_\_ Phone: \_\_\_\_\_  
Contact: \_\_\_\_\_ Fax: \_\_\_\_\_  
3. Reference: \_\_\_\_\_ Phone: \_\_\_\_\_  
Contact: \_\_\_\_\_ Fax: \_\_\_\_\_

### Our Terms of Sale:

I/We certify that all information disclosed is correct, and agree that all accounts to Rubbing Hands are due and payable within invoice terms.

I/We hereby make this application for the purpose of securing credit from Rubbing Hands. By my/our signature below I authorize Rubbing Hands to obtain and/or exchange personal and commercial credit information with any and all credit information agencies/industry association credit committees in order to establish or verify my financial status.

Rubbing Hands reserves the right to charge interest on all overdue accounts.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_