



info@serenitelectronics.com  
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## Application for Credit

60 Firemans Way  
Poughkeepsie, NY 12603  
Voice: 845-486-5195  
Fax: 845-486-5196

Company Information	
Company Name:	
Contact Name:	
Contact E-mail:	
Contact Phone:	
Contact Fax:	
Line of Business or Profession:	
Country:	
Federal Tax ID:	
Resale Number:	
Billing Address	
Address 1:	
Address 2:	
City:	
State/Province:	
Postal Code:	
Country:	
Company Ownership	
Type(required):	? Individual      ? Partnership      ? Corporation
Principal:	
Name:	
Title:	
Credit References (Please furnish complete information)	
#1 - Company Name:	
Address:	
City, State, Zip:	
Phone:	
Fax:	
#2 - Company Name:	
Address:	
City, State, Zip:	
Phone:	
Fax:	
#3 - Company Name:	
Address:	

<b>City, State, Zip:</b>	
<b>Phone:</b>	
<b>Fax:</b>	
<b>#4 - Company Name:</b>	
<b>Address:</b>	
<b>City, State, Zip:</b>	
<b>Phone:</b>	
<b>Fax:</b>	
<b>Bank References (Please furnish complete information)</b>	
<b>Bank Name:</b>	
<b>Address:</b>	
<b>City, State, Zip:</b>	
<b>Contact:</b>	
<b>Account Number:</b>	
<b>Phone:</b>	
<b>Fax:</b>	

I hereby certify that the above information is to the best of my knowledge, true and correct.

Please fill out and fax back this form to Serenity Electronics, Inc. at 845-486-5196

Signature: \_\_\_\_\_

Print: \_\_\_\_\_

Date: \_\_\_\_\_