

Fabricated Packaging Materials

Credit Application

Name of Business or Individual

Fabricated Packaging Materials, Inc.
2109 Commerce Street
Lancaster, Ohio 43130
P: 740-687-5934
F: 740-687-3671

Address, City, State, Zip

Phone

Fax

Email

Corporation Partnership Sole Ownership

Federal ID or Social Security Number: _____

_____ Yrs. In Business

Sales Tax: Taxable or Exempt

Your: Bank Name

Individual to Contact

Phone

Address, City, State, Zip

Credit References: (Name, Address, Phone)

The above information is for the purpose of obtaining credit and is warranted to be true. I agree to pay all bills within 30 days of receipt of invoice or as otherwise expressly agreed.

I hereby authorize the firm to which this application is made to investigate the references herein listed.

Signature: _____ Title: _____