

## Government / Educational Organization Expedited Credit Application

### ORGANIZATION INFORMATION

Legal Name of Organization:					
DBA Name (if different):					
Company Address:			Billing Address (if different):		
City:	State:	Zip:	City:	State:	Zip:
Primary Phone:			Primary Fax:		
Number of Employees:	Years in Business:		EIN:	Dunn & Bradstreet (DUNS) #:	

### PRINCIPALS RESPONSIBLE FOR BUSINESS TRANSACTIONS

Purchasing Contact	Name	Phone	Email
Accounts Payable Contact	Name	Phone	Email
Additional Contact	Name & Title	Phone	Email

### CONFIRMATION OF INFORMATION ACCURACY AND RELEASE OF AUTHORITY TO VERIFY

I hereby certify that the information in this credit application is correct. The information included in this credit application is for use by Precision Roller in determining the amount and conditions of credit to be extended. I understand that Precision Roller may also utilize other sources of credit which it considers necessary in making this determination. Further, I hereby authorize Precision Roller to access information from any source necessary to determine credit worthiness.

Signature:	Title:	Date:
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**Please complete all information requested. Incomplete applications will not be processed.**

*We may contact you if additional information is required.*