

MW Industries, Inc.
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CREDIT APPLICATION INFORMATION

Please choose method of submission for approval on all invoices:
Fax ___ Email ___ Reg. Mail ___

Company Legal Name: _____
Company DBA: _____
Contact: _____
Phone #: _____ Fax # _____ Email: _____

State of Incorporation: _____
Federal Tax ID #: _____ Year Established: _____
DUNS #: _____
Sales Tax Exempt: _____
(*Note: If you are Tax Exempt – Please Provide a Sales Tax Exempt Form)

Type of Business: _____

Officers:
CEO/President: _____
VP/CFO: _____

AP Contact: _____
Phone No.: _____ Fax No.: _____
E-mail Address: _____

Bank References:

Name of Bank: _____ Acct # _____
Bank Contact: _____
Telephone #: _____ Fax: _____

Trade References:

Name: _____ Acct # _____
Contact: _____ E-mail: _____
Telephone #: _____ Fax: _____

Name: _____ Acct # _____
Contact: _____ E-mail: _____
Telephone #: _____ Fax: _____

Name: _____ Acct # _____
Contact: _____ E-mail: _____
Telephone #: _____ Fax: _____