

***CANDY TECH***  
**CREDIT INFORMATION REQUEST**

Business Name \_\_\_\_\_ Type of Organization: \_\_\_\_\_  
Address \_\_\_\_\_ Corporation \_\_\_\_\_  
City & State \_\_\_\_\_ Partnership \_\_\_\_\_  
Phone \_\_\_\_\_ Individual \_\_\_\_\_  
Date Established \_\_\_\_\_ Fax \_\_\_\_\_  
Principals: Officers or Partners \_\_\_\_\_ D&B no. \_\_\_\_\_

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**BANKING AFFILIATION**

Name \_\_\_\_\_ Name \_\_\_\_\_  
Address \_\_\_\_\_ Address \_\_\_\_\_  
City & State \_\_\_\_\_ City & State \_\_\_\_\_  
Phone \_\_\_\_\_ Phone \_\_\_\_\_  
Fax \_\_\_\_\_ Fax \_\_\_\_\_

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**OTHER CREDIT REFERENCES**

Name \_\_\_\_\_ Name \_\_\_\_\_  
Address \_\_\_\_\_ Address \_\_\_\_\_  
City & State \_\_\_\_\_ City & State \_\_\_\_\_  
Phone \_\_\_\_\_ Phone \_\_\_\_\_  
Fax \_\_\_\_\_ Fax \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_  
Address \_\_\_\_\_ Address \_\_\_\_\_  
City & State \_\_\_\_\_ City & State \_\_\_\_\_  
Phone \_\_\_\_\_ Phone \_\_\_\_\_  
Fax \_\_\_\_\_ Fax \_\_\_\_\_

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WE REQUIRE THIS INFORMATION IN ORDER TO  
ESTABLISH A CREDIT ACCOUNT AND TO SERVICE  
YOU PROMPTLY. THIS INFORMATION WILL BE  
USED WITH THE STRICTEST CONFIDENCE.

Signed \_\_\_\_\_  
Title \_\_\_\_\_  
Date \_\_\_\_\_

THANK YOU

**Fax this application to 847-229-1211 or email it to [sweetsales@candytech.com](mailto:sweetsales@candytech.com)**

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PHONE: 847-229-1011 FAX: 847-229-1211