

**Szabo Associates, Inc., Sample Credit Application**

**Special Note:** One should check with their local counsel on any state statutes which may conflict with terms or conditions and with their own management concerning policy.

**WSZB MEDIA  
APPLICATION FOR CREDIT**

(Processing can take up to five business days)

**BUSINESS NAME** Formal or Legal: \_\_\_\_\_

**OTHER BUSINESS OR TRADE NAME(S) USED:** \_\_\_\_\_

**BUSINESS ADDRESS:** \_\_\_\_\_  
(Street) (City) (State) (Zip)

**TELEPHONE:** ( ) \_\_\_\_\_ **FAX:** ( ) \_\_\_\_\_ **A/P EMAIL** \_\_\_\_\_

**DATE FIRM ESTABLISHED:** \_\_\_\_\_ **BRIEF DESCRIPTION OF INDUSTRY:** \_\_\_\_\_

**ANNUAL SALES:** \$ \_\_\_\_\_ **NUMBER OF FULL TIME EMPLOYEES:** \_\_\_\_\_ **PUBLIC COMPANY:**  YES  NO

**APPLICANT IS A (check one):**  Advertising Agency  House Agency  Buying Service  Advertiser

If Advertising Agency or Buying Service, list three current clients:

\_\_\_\_\_

**ESTIMATED MONTHLY ADVERTISING EXPENDITURE:** \$ \_\_\_\_\_

**CHECK TYPE OF BUSINESS ENTITY:** \_\_\_\_\_ **FEDERAL I.D. NUMBER:** \_\_\_\_\_

- PROPRIETORSHIP** (Give legal Name of Proprietor, Resident Address, Resident Telephone#, Social Security #)
- PARTNERSHIP** (Give the Full Name(s), Address (es), and Social Security #'s of all General and Non-Limited Partners)
- CORPORATION** (Give names, addresses, and telephone numbers of officers)
- LIMITED LIABILITY COMPANY** (List members and telephone numbers of management committee or sole manager if no committee)

NAME & TITLE	RESIDENCE STREET	CITY	STATE	TELEPHONE	SOCIAL SECURITY #
1. _____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____	_____
6. _____	_____	_____	_____	_____	_____

**BANK REFERENCE**

**PRIMARY BANK NAME:** \_\_\_\_\_ **CONTACT:** \_\_\_\_\_

**STREET ADDRESS:** \_\_\_\_\_ **CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **TELEPHONE:** ( ) \_\_\_\_\_

**CHECKING ACCT. #** \_\_\_\_\_ **SAVINGS ACCT. #** \_\_\_\_\_ **LOAN ACCT. #** \_\_\_\_\_

**CHECKING ACCT. #** \_\_\_\_\_ **SAVINGS ACCT. #** \_\_\_\_\_ **LOAN ACCT. #** \_\_\_\_\_

**CREDIT REFERENCES (PREFERABLY MEDIA)**

NAME	CITY	STATE	TELEPHONE NO.	DATE OF PURCHASE
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____