

CREDIT APPLICATION

PLEASE EMAIL TO CS@MPRINT.COM

COMPANY

| | | |
|--------------------------------------------------------------------------------------------|-------------------|-----|
| COMPANY NAME | | |
| CONTACT FIRST NAME | CONTACT LAST NAME | |
| ADDRESS LINE1 | | |
| ADDRESS LINE2 | | |
| CITY | STATE | ZIP |
| PHONE | FAX | |
| EMAIL | | |
| FED EX NUMBER | UPS NUMBER | |
| PURCHASE ORDER NUMBER - REQUIRED? <input type="checkbox"/> YES <input type="checkbox"/> NO | | |
| TAX EXEMPT NUMBER (TAX EXEMPT FORM REQUIRED) | | |

BUSINESS DATA

| | |
|----------------------|----------------|
| NUMBER OF EMPLOYEES | ANNUAL REVENUE |
| AUTHORIZED SIGNATURE | DATE |

TRADE REFERENCE

| | | | | | |
|--------------|---------|---------|---------|-------|-----|
| COMPANY NAME | CONTACT | COMPANY | CONTACT | | |
| PHONE | FAX | PHONE | FAX | | |
| ADDRESS | | ADDRESS | | | |
| CITY | STATE | ZIP | CITY | STATE | ZIP |

BANK REFERENCE

| | | |
|----------------|--------------|-----|
| BANK | CONTACT NAME | |
| PHONE | FAX | |
| ADDRESS | | |
| CITY | STATE | ZIP |
| ACCOUNT NUMBER | | |

FOR USE BY MICROPRINT

CREDIT LIMIT ASSIGNED _____

TAX EXEMPT FORM RECEIVED _____



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