



**CARDINAL  
SAWS & BLADES**

100 Barren Hill Road, Conshohocken, PA 19428 • Phone: 610-828-6606 • Fax 610-828-7798

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## APPLICATION FOR CREDIT

Your Company Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Contact Person \_\_\_\_\_ Position \_\_\_\_\_

Email \_\_\_\_\_

### Major Trade References/Suppliers

1. Firm Name \_\_\_\_\_ Are you their distributor/dealer? \_\_\_\_\_

Address \_\_\_\_\_ Years doing business? \_\_\_\_\_

\_\_\_\_\_ Annual Purchases? \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Products purchased for resale \_\_\_\_\_

2. Firm Name \_\_\_\_\_ Are you their distributor/dealer? \_\_\_\_\_

Address \_\_\_\_\_ Years doing business? \_\_\_\_\_

\_\_\_\_\_ Annual Purchases? \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Products purchased for resale \_\_\_\_\_

3. Firm Name \_\_\_\_\_ Are you their distributor/dealer? \_\_\_\_\_

Address \_\_\_\_\_ Years doing business? \_\_\_\_\_

\_\_\_\_\_ Annual Purchases? \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Products purchased for resale \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_