



MOSSY NISSAN

12150 OLD KATY RD. HOUSTON, TX 77079

DIRECT 281.589.5309 **FAX** 281.496.9247



APPLICATION for CREDIT

The following information must be provided. It will be held in strict confidence.

COMPANY : _____ How Long in Business ? _____

DEALER BODY SHOP MECHANICAL OTHER _____

Corporation: YES NO What type? _____ PARTNERSHIP _____ Sole Proprietor _____

Fed. ID # _____ **SALES TAX (TX or LA)#** _____

ADDRESS : _____

CITY _____ **STATE** _____ **ZIP** _____ **PHONE #** _____

Mailing Address ? Yes No Ship to Address ? Yes No

Name(s) of Principal(s)	Address	Phone #
_____	_____	_____
_____	_____	_____

BANK NAME : _____

PHONE # _____ **CONTACT :** _____

CREDIT REFERENCES :

1. _____ phone # _____
2. _____ phone # _____
3. _____ phone # _____

CREDIT TERMS : Due by the 10th of the following month. We (I) certify all information on form is correct.

We (I) understand your credit terms and agree to the proper payment in consideration of extending credit for " 30 Day Charge "

(Signed) _____ (Title) _____ (Date) _____

The person signing grants permission to allow Mossy Nissan to verify necessary credit references and Bank information.

This area reserved for DEALER Notes and Verification

1. _____
2. _____
3. _____

Credit Approved by :

YES **NO**

DATE : _____