**PROGUARD GROUP**

**1001 B Avenue, Suite #100**

**San Diego, CA 92118**

**Ph. 844-PRO-GARD**

**Fax 888-244-5333**

## [www.proguardbuilding.com](file:///C:\Users\Ed\AppData\Local\Microsoft\Windows\Temporary%20Internet%20Files\Content.Outlook\0PUL5CDV\www.proguardbuilding.com)

**CREDIT APPLICATION**

# Name/Address Salesman:

|  |  |  |  |
| --- | --- | --- | --- |
| Last: | First: | Middle Initial: | Title |
| Name of Business: |  |  | Tax I.D. Number |
| Address: | | | |
| City: | State: ZIP: | Phone: | |
| Web Site | E- | mail: Fax: | |

**Company Information**

|  |  |  |
| --- | --- | --- |
| Type of Business: | In Business Since: |  |
| Legal Form Under Which Business Operates: | | |
| Corporation | Partnership | Proprietorship |
| If Division/Subsidiary, Name of Parent Company: | In Business Since: |  |
| Name of Company Principal Responsible for Business Transactions: | Title: |  |
| Address: City: State: | ZIP: Phone: |  |
| Name of Company Principal Responsible for Business Transactions: | Title: |  |
| Address: City: State: | ZIP: Phone: |  |

**Bank References**

|  |  |  |  |
| --- | --- | --- | --- |
| Institution Name: | Institution Name: | Institution Name: |  |
| Checking Account #: | Savings Account #: | Home Equity Loan: | Loan Balance: |
| Address: | Address: | Address: |  |
| Phone: | Phone: | Phone: |  |

**Trade References**

|  |  |  |
| --- | --- | --- |
| Company Name: | Company Name: | Company Name: |
| Contact Name: | Contact Name: | Contact Name: |
| Address: | Address: | Address: |
| Phone: | Phone: | Phone: |
| Account Opened Since: | Account Opened Since: | Account Opened Since: |
| Credit Limit: | Credit Limit: | Credit Limit: |
| Current Balance: | Current Balance: | Current Balance: |

**Trade References**

|  |  |  |
| --- | --- | --- |
| Company Name: | Company Name: | Company Name: |
| Contact Name: | Contact Name: | Contact Name: |
| Address: | Address: | Address: |
| Phone: | Phone: | Phone: |
| Account Opened Since: | Account Opened Since: | Account Opened Since: |
| Credit Limit: | Credit Limit: | Credit Limit: |
| Current Balance: | Current Balance: | Current Balance: |

**Trade References**

|  |  |  |
| --- | --- | --- |
| Company Name: | Company Name: | Company Name: |
| Contact Name: | Contact Name: | Contact Name: |
| Address: | Address: | Address: |
| Phone: | Phone: | Phone: |
| Account Opened Since: | Account Opened Since: | Account Opened Since: |
| Credit Limit: | Credit Limit: | Credit Limit: |
| Current Balance: | Current Balance: | Current Balance: |

I/We authorize PROGUARD to investigate the applicant’s and my/our credit history (both business and personal), bank references and any information deemed necessary by PROGUARD to extend credit. I/W e agree to: (a) immediately notify PROGUARD in writing, delivered in person or by certified mail return receipt requested, of any change in applicant’s ownership, form of business, address, or the termination of a person’s authority to incur charges under the Account and (b) indemnify defend and hold PROGUARD harmless for any loss incurred thereby as a result of my/our failure to provide said written notice. This agreement shall remain in full force and effect until written notice of revocation is receive by PROGUARD.

Signature Date

Print NAME

**Return Completed Application to:**

**PROGUARD**

**FAX 8882445333**

**TEL 844 PRO-GARD**