



CREDIT APPLICATION

please fax completed to 305.883.4460

COMPANY INFORMATION

Corporate Name _____ EIN # ____ - _____

DBA and/or Other Names _____

Company Address _____

City, State, Zip _____

Telephone _____ Fax _____

Year Business Started: _____ Listed in Dun & Bradstreet? Y or N Listed in Lyons? Y or N

OWNERS, PARTNERS, OR CORPORATE OFFICERS

Name _____ Title _____ Phone _____

2nd Name _____ Title _____ Phone _____

BANK REFERENCES

Bank Name: _____ Acct # _____

Address: _____

Contact: _____ Phone: _____

TRADE REFERENCES

Name: _____	Name: _____
City, State: _____	City, State: _____
Phone: _____	Phone: _____
Fax: _____	Fax: _____
Account #: _____	Account #: _____
Name: _____	Name: _____
City, State: _____	City, State: _____
Phone: _____	Phone: _____
Fax: _____	Fax: _____
Account #: _____	Account #: _____

I certify that the above information is true. The information is to be used only for opening an credit account with Riado, Inc. through DSA Factors | P.O. Box 577520 Chicago, IL 60657 | Phone # 773-248-9000.

Sign, Title, & Date: _____