PERFORMANCE SWING STAGE, INC.

CREDIT APPLICATION

COMPANY INFORMATION:

Trade Name:			Contractor's License #:
Website:		Email:	
Street Address:		Phone:	
City, State, Zip:		Fax:	
Billing Address:		Accts. Payable Contact & Email:	
Type of Business:		Safety Contact & Email:	
Billing Cut Off Date (if applicable)		P.O. Required?	In Business Since:
Bank:	Contact Name:	Phone Number:	Account Number:

OWNER/OFFICER

Owner(s):	Title:
Federal ID, Driver's License or Social Security Number;	Phone:

TRADE REFERENCES

Company Name:		Fax Number:
Address:	City, State, Zip:	Phone Number:
Company Name:		Fax Number:
Address:	City, State. Zip:	Phone Number:
Company Name:		Fax Number:
Address:	City, State, Zip:	Phone Number:

PLEASE EMAIL COMPLETED CREDIT APPLICATION TO Martha@performanceswingstage.com

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