

FGI Filmquest Group, Inc.

320 Remington Blvd, Bolingbrook, IL 60440

(630) 226 9800 · (630) 226 9400 Fax

CREDIT APPLICATION

Please read carefully: The minimum time required to process this application is five working days. Before we can accept your order on credit terms, this credit application must be thoroughly completed and sent to the Credit Department for determination of terms. Please also note that the references listed on this application should be comparable, in amount of credit extended, to the amount of credit you are requesting from **Filmquest Group, Inc.** Thank you.

Firm Name _____
Phone _____
Address _____ Fax _____
City _____ State _____
Zip _____
Type of Business _____ Annual Sales _____
Date Established _____ No. of Employees _____ Resale No. _____
Parent Company _____ Federal I.D. No. _____

Our terms are **Net 30 Days**. Do you see any problems with these terms? _____
If yes, please explain: _____

Ownership: Sole Ownership _____ Partnership _____ Corporation _____ Division of _____

Officers/Principals

Name	Title
_____	_____
_____	_____
_____	_____

Bank Name _____ Phone _____ Acct. No _____

Address _____ City _____ State _____ Zip _____

Bank Name _____ Phone _____ Acct. No _____

Address _____ City _____ State _____ Zip _____

Major Credit References: Amount of Credit you are requesting: _____

Name _____ Phone _____ Fax _____

Address _____ City _____ State _____ Zip _____

Name _____ Phone _____ Fax _____

Address _____ City _____ State _____ Zip _____

Name _____ Phone _____ Fax _____

Address _____ City _____ State _____ Zip _____

Applicant's signature attests financial responsibility, ability and willingness to pay our invoices in accordance with our terms. Our terms are **Net 30 Days**.

Signature of Principal _____

Title _____

Date _____ Company _____

For office use only

D & B _____ Date approved _____

Other _____ Credit _____

Limit _____
SIC# _____ Salesman _____

Comments _____

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