

**BUSINESS CREDIT APPLICATION**

1355 Shoreway Road, Belmont, CA 94002 | Email: [credit@jameco.com](mailto:credit@jameco.com)  
 Tel: (650) 592-6718 | Fax: (650) 802-1583 / (650) 592-2503

Please sign and return attention: Credit Department

Credit Limit Desired:	\$
-----------------------	----

**COMPANY INFORMATION**

Company:	Contact Name:
Billing Address:	
Shipping Address:	
Telephone:	Email:

Please select one of the following:

Company	Sole Proprietorship	Partnership	Dun & Bradstreet No:
---------	---------------------	-------------	----------------------

Years In Business:	Line of Business:
--------------------	-------------------

Owners/Officer


**BANK AUTHORIZATION (ONE REQUIRED)**

Bank Name:	Commercial Checking:
Address:	Account Number:
Telephone:	Other Account Numbers:
Fax:	Authorized Signature:

**TRADE REFERENCES**

Company:	
Address:	
Telephone:	Email:

Company:	
Address:	
Telephone:	Email:

Company:	
Address:	
Telephone:	Email:

**Authorized Signature**

**Title**

**Date**

When credit is extended, payments will be made within 30 days of shipment. Should applicant default in payment, Jameco is entitled to add incurred collection cost and attorney's fees to the unpaid balance.