TOTAL AUDIO-VISUAL SYSTEMS, INC.
923 SLIGO AVENUE, SILVER SPRING MARYLAND 20910
Voice (301) 589-3337 Toll Free (800) 447-7632 Fax (301) 495-4770

CREDIT APPLICATION

LEGAL NAME OF COMPANY _____

TRADE NAME (IF DIFFERENT FROM ABOVE) _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____ **PHONE NO.** _____

DATE OF BUSINESS ORGANIZED _____ **DATE INCORPORATED** _____ **WHICH STATE** _____

NATURE OF YOUR BUSINESS

CHECK ONE **( ) PROPRIETORSHIP** **( ) PARTNERSHIP** **( ) CORPORATION**

CHECK ONE **( ) TAXABLE** **( ) TAX EXEMPT** **( ) RESALE**

PLEASE ENCLOSE A COPY OF YOUR EXEMPT OR RESALE CERTIFICATE

NAME, TITLE AND HOME ADDRESS OF PROPRIETOR OR PARTNERS OR OFFICERS

NAME	TITLE	HOME ADDRESS	PHONE NO.

NAME OF BRANCHES OR AFFILIATES	ADDRESS	PHONE NO.

BANK REFERENCES	ADDRESS	CONTACT/ACCOUNT NO.	PHONE NO.

ACTIVE TRADE REFERENCES (SUPPLIERS)

NAME	ADDRESS	PHONE NO.
1		
2		
3		
4		

CREDIT LINE REQUIRED $ _____ **BRANCH LOC** _____ **BRANCH LOCATION** _____

NAME OF COMPANY _____ **DATE** _____

SIGNATURE (OFFICER, PARTNER OR PROPRIETOR) _____

PRINT NAME _____ **TITLE** _____