

Phone Number (800) 225-0550
 Fax Number (781)793-1133 Credit Department

CHARLES RIVER APPAREL, INC
 APPLICATION FOR CREDIT

Check One: _____
 New Account _____
 Exist. Account _____ if Exist. Account List Acct # _____

Legal Name of Business	Type of Business-Circle ASI Retailer ScrnPrt/Emb College/Univ. Uniform Other
D/B/A	Type of Entity-Circle Corporation Partnership Sole Proprietorship
Billing/Mailing Address	If incorporated: State of incorporation Year of incorporation
City, State, Zip Code	Fed. ID #/SS#
Principals of Business / % of Ownership	Phone and Fax Numbers
Years in Business	e-mail Address Web Site Address
Number of Employees	Contact Person/Phone # for PO Questions
Estimated Monthly Purchases	Contact Person/Phone # for Accounts Payable Questions
TAX EXEMPT-CIRCLE Yes No	DUNS # ASI #
Financial Statements Included With Application-Circle Yes No If no, please explain why	Credit Limit Requested
	How often and when does your Company issue checks?

BANK REFERENCES	
Name	Account Number
Address	Contact
City, State, Zip Code	Phone Number

TRADE REFERENCES				
Name of Company	Account Number	Address	Phone Number	Fax Number
1.				
2.				
3.				
4.				

AUTHORIZATION	
THE ABOVE INFORMATION IS GIVEN FOR THE PURPOSE OF OBTAINING CREDIT AND IS WARRANTED TO BE TRUE. WE HEREBY AUTHORIZE CHARLES RIVER APPAREL INC. TO INVESTIGATE THE REFERENCES LISTED ABOVE AND TO CONTACT CREDIT RATING AGENCIES AND OBTAIN CREDIT REPORTS FROM SUCH AGENCIES FOR THE PURPOSE OF ESTABLISHING THE CREDIT WORTHINESS OF OUR BUSINESS.	
Signature	Date
Print Name	Title

NOTE: An incomplete application cannot be processed and will be returned. We will attempt to complete all fully completed credit applications within 5 business days of our receipt. You will be notified of your credit limit and terms. Thank you for considering us for your business.

FAX TO 781-793-1133

E-MAIL TO
 AR@charlesriverapparel.com

MAIL TO THE ATTENTION OF THE
 CREDIT DEPARTMENT
 CHARLES RIVER APPAREL
 1205 Providence Highway
 Sharon, MA 02067