

CONFIDENTIAL CREDIT APPLICATION(NEW ACCOUNTS)

Business Name / Company Name			
Address			
Telephone		Fax No.	
E-mail			
FORM OF BUSINESS ORGANIZATION			
<input type="checkbox"/> Single Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation			
SEC No.		VAT	
DTI		TIN No.	
YEAR ESTABLISHED		NO. OF EMPLOYEES	
KEY PERSONNEL			
Position	CONTACT PERSON		Birth Date
President/ Gen. Manager			
Sales Manager			
Finance Manager			
Traffic Manager			
Nature of Business			
Shipping Information (Commodity, Import/Export, Terms of Shipment, Origin Destination, Etc.)			
BANKING INFORMATION			
Depository Bank	Branch		Acct. no.
CHECK SIGNATORIES			
Name	Position	Specimen Signature	
OTHER INFORMATION			
Your Contact in Coltrans			
Date Filed			
Filed by			