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**CONFIDENTIAL CREDIT EXTENSION APPLICATION
(Existing Account)**

Date : _____

We hereby apply for the extension of credit by your firm. The following information is submitted as a basis for your consideration of our application.

Company Name			
Address			
Tel Number			
Fax Number		No. of Employees	
E-mail		Contact Person	
Year Established		Type of Ownership	

OWNERS/PARTNERS/MAJOR STOCKHOLDERS

NAME	ADDRESS	TITLE/POSITION

KEY PERSONNEL

NAME	POSITION

BANK REFERENCE

NAME OF BANK	ADDRESS

OTHER SUPPLIER REFERENCE

SUPPLIER'S NAME	ADDRESS

Current Credit Line _____
Current Credit Amount PHP _____

Requested Credit Line PHP _____
Requested Credit Amount PHP _____

***You can help us considerably by attaching a copy of your Latest Audited Financial Statements**

I/We affirm that the foregoing answer are true and correct and this application will remain the property of COLTRANS CARGO. You or whomever you may assign may obtain, and sources to which you may apply are authorized to provide any information relative to this application as well as the documents submitted.

Print Name & Sign
OWNER OR AUTHORIZED REPRESENTATIVE
DATE: