

REQUEST FOR CREDIT VERIFICATION

To: _____

Fax: _____

Phone: _____

The applicant named below has requested credit from us and has given your name as a reference. We would greatly appreciate your cooperation in helping us to make a fair determination. We will maintain this information in the strictest confidence and would be pleased to reciprocate upon your request.

Name/Firm _____ Phone _____

Address _____

City _____ State _____ Zip _____

Credit From _____ to _____

Terms _____

Highest recent credit _____

Total present balance _____

Total past due / How many days? _____

Activity in current year _____ heavy _____ mod _____ light

Activity in previous year _____ heavy _____ mod _____ light

Payment record

- Discounts
- Prompt
- Acceptable
- Slow but collectible
- Requests extension
- Unsatisfactory
- With agency/attorney
- Account secured
- Accepts CODs

Credit refused because _____

Makes unjust claims such as _____

Comments _____

Reported by _____ Position _____ Date _____

PLEASE RETURN ASAP EITHER BY MAIL OR FAX.
