



Dealer Credit Application

Please fax completed application to 1-260-665-0028 or email to ryan@thepierplace.com

Legal Name of Business

Trade Name: (if different)

Tax ID:

Address :

City Prov/State

Ship to address

City Prove/State

If multiple ship to addresses, please attach a list

Accounts Payable contact name: Phone #

Accounts Payable email address Fax #

How many years in business? Tax ID:

Owners names, addresses, and phone numbers. If there are more than four please provide a separate list.

Owner 1

Owner 2

Owner 3

Owner 4