Cawley Personnel Services, Inc.

Credit Application

Company Name: _____ Date: _____
Phone Number: _____ Type of Business:
Street Address: _____ □Corporation □ Partnership
City: _____ State: _____ Zip: _____ □Sole Proprietorship
Billing Address: _____ Years in Business: _____
City: _____ State: _____ Zip: _____ # of Employees: _____
Website: _____ Type of Service: _____

Principal Officers and Owners

1. Name: _____ Title: _____
   I Authorize Release of Credit Information _____
   Signature
2. Name: _____ Title: _____
   I Authorize Release of Credit Information _____
   Signature

Banking References

1. Bank Name: _____ Account #: _____
   Address: _____ Phone #: _____

2. Bank Name: _____ Account #: _____
   Address: _____ Phone #: _____

Trade References

1. Vendor Name: _____ Phone #: _____
   Address: _____
   Street Address City, State Zip

2. Vendor Name: _____ Phone #: _____
   Address: _____
   Street Address City, State Zip

3. Vendor Name: _____ Phone #: _____
   Address: _____
   Street Address City, State Zip