

Application for Credit

EFR CUSTOMHOUSE BROKERAGE



Return Fax # (619) 710-1633

e-mail: jaramirez@efr-chb.com

BY:

Name of Firm of Individual	Years in Business
Address	Phone Number
City, State, Zip Code	Fax Number

Hereby applies for credit in accordance with terms and conditions of EFR CustomHouse Brokerage.

PAYMENT TERMS ARE DUE UPON RECEIVED.

The following information must be provided. It will be held in the strictest confidence.

Ownership: Corporation Check here if incorporated within the past 12 months Partnership Individual

Names(s) of Principles(s)	e-mail address
Address	Phone Number
City, State, Zip Code	Fax Number

Finance:

Bank	Account Number
Address	Bank Officer of depart
City, State, Zip Code	Phone Number

Trade References:

Business Name	Complete Address	Zip	Account #	Phone Number

Shipping References Excluding UPS/FEDEXP:

Business Name	Complete Address	Zip	Account #	Phone Number

We certify that all the information on this form is correct. We fully understand your credit terms and agree to the proper payment in consideration of extended credit. In the event of non-payment within the stated terms, we acknowledge that we may be subject to attorney's and/or collection fees in addition to the original amounts owed. 25% will be added if an account is sent to collections. CBP duties and fees are not subject to credit.

(Signed) _____ (Title) _____ (Date) _____

DO NOT WRITE IN SPACE BELOW. FOR EFR-CHB USE ONLY

Trade Verification:	(Length of business relationship?)	Credit Line?	How does customer pay?)
1)	_____	_____	_____
2)	_____	_____	_____

Shipping Verification _____