

Credit Application

Please complete all areas and send to:
Technivend, Inc.
210 Andover Street/Ste 17
Wilmington, MA 01887
Email: Sales@Technivend.com



THE WITTERN GROUP

FINANCIAL SERVICES

Sales Information

Name of Salesperson: _____ Don't know or don't have one, enter "None"

Amount of Credit Requested: \$0-\$5,000 \$5,000-\$25,000 \$25,000+

Business Information

Current Finance Customer: Current Customer Past Customer New Customer Finance Customer Number: _____

Type of Business: Individual Proprietorship Corporation Other

Years in Vending: Not in Vending New Vendor 1-2 years 3-4 years 5+ years

Number of Routes: _____ Number of Locations: _____ Number of Machines: _____ Annual Vending Sales: _____

Customer Name (Legal): First Name: _____ Middle Initial: _____ Last Name: _____

Business or DBA Name: _____ If none, enter "None".

Business Address Line 1: _____

Business Address Line 2: _____

City: _____ State/Province: _____ Zip/Postal: _____ Country: _____

Business Phone: _____ Cell Phone/Alternate: _____ Business Fax: _____

Owner/Authorized Signer 1:

First Name: _____ Last Name: _____ Social Security Number: _____

Owner/Authorized Signer 2:

First Name: _____ Last Name: _____ Social Security Number: _____

Credit Information

Number of Years at Address: _____ Home Owner Renter

Same as business address: Yes No

Address Line 1: _____ Address Line 2: _____

City: _____ State/Province: _____ Zip/Postal: _____ Country: _____

Phone: _____

Nearest Relative not living with Customer:

First Name: _____ Last Name: _____ Relationship: _____

Phone: _____

Employment Information

Employed Outside of Vending? Yes No

Employer 1: _____ Salary: _____ Position: _____

Years Employed: _____ Phone: _____

Employer 2: _____ Salary: _____ Position: _____

Years Employed: _____ Phone: _____

Trade References

Company Name: _____ Phone: _____ Account: _____

Company Name: _____ Phone: _____ Account: _____

Company Name: _____ Phone: _____ Account: _____

Important Notice

I understand that Wittern Financial Services is relying on this information in extending credit and I warrant it to be true. I hereby authorize Wittern Financial Services or any bank/and or trade bureau or other investigative agencies employed by Wittern Financial Services to investigate the references herein listed or other data obtained from me or any other person pertaining to my credit and financial responsibility. The undersigned authorizes all parties contacted to release credit information requested, or its successors or assigns.

Signature _____ (position of signer)

Signature _____ (position of signer)

_____ Date

Revision Date: 04/19/2006

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You By 