



CAPITAL APPAREL, LLC CREDIT APPLICATION

PRINT PAGE, FILL IN INFORMATION, SIGN AND FAX TO 615-255-5659

You can also email this to custserv@capitalapparel.com

Credit Line Applied For _____

Applicant Legal Business Name _____

DBA/Tradestyle _____

Street Address _____

Billing Address _____

Phone # _____ Fax # _____

Federal Tax ID # _____ E-mail _____

Years In Business _____

ASI# _____ Dun & Bradstreet DUNS# _____

PRINCIPAL/OWNER

Name _____ Title _____

BANK INFORMATION

Name of Bank(s) _____

Address _____

Phone # _____ Fax # _____

Contact _____ Account # _____

REFERENCES

Name of Reference _____

Address _____

Phone # _____ Fax # _____

Contact _____ Account # _____

Name of Reference _____

Address _____

Phone # _____ Fax # _____

Contact _____ Account # _____

Name of Reference _____

Address _____

Phone # _____ Fax # _____

Contact _____ Account # _____

Authorized By _____

Please Print Name _____ Title _____