



RCS AUTO RECYCLERS

10809 HWY 271 N.
TYLER, TX 75708
LOCAL: (903)-877-4020
FAX: (903)877-2603
TOLL FREE:800-259-4020

CREDIT APPLICATION

DATE: _____

BUSINESS TYPE: Sole partnership_____ Partnership_____ Corporation in state of _____

Number of years in business_____ # of employees_____

Company Name_____

Address_____

City_____ State_____ Zip Code_____

Delivery Address_____

City_____ State_____ Zip Code_____

Forklift Dock Delivery

Phone (____) _____ Receiving hours _____ Hand unload Ground delivery

Key Personnel

Owner/Manager/ President_____ Treasure/Controller _____

Purchasing agent_____ Accounts payable _____

I HEREBY CERTIFY: That we hold valid sellers Permit No. _____
Issued pursuant to the Sales Use Tax Law that are engaged in the business of
selling _____

If Proprietorship or partnership, please show name and home address of owners:

Name_____

Name_____

Address_____

Address_____

City_____ State_____ Zip_____

City_____ State_____ ZIP_____

Phone (____) _____

Phone (____) _____

Credit information

Bank_____ Branch_____ Account #_____

Address_____ Phone #_____

Trade References: Please list three, with complete addresses

1. Name_____ Address_____
City_____ Zip_____ Phone (____) _____
2. Name_____ Address_____
City_____ Zip_____ Phone (____) _____
3. Name_____ Address_____
City_____ Zip_____ Phone (____) _____