

THE WALKER COMPANY
P.O. BOX 308
MOUNT STERLING, KY 40353
TELEPHONE: (859) 498-0092 / FAX: (859) 498-0093
EMAIL: mmartin@thewalkercompany.com



PERSONAL CREDIT APPLICATION

NAME/ADDRESS

Requested Line of Credit : \$				
Name :		Daytime Telephone: ()	Fax : ()	
Mailing Address :				
P.O. Box / Street		City	State	Zip Code
Physical Address :				
Street		City	State	Zip Code
Email Address :				
Employer :			Work Telephone # :	
Spouse's Name :				
Spouse's Employer :			Spouse's Work Telephone # :	
List One Relative :				
Name		Relationship	Telephone #	

BANK REFERENCES

Commercial Bank :				
Name		Address		
Officer to Contact :				
Name		Telephone #		
Check All That Apply : Checking _____ Savings _____ MMA _____ Loan _____				

TRADE REFERENCES

1)		
Name	Address	Telephone #
2)		
Name	Address	Telephone #

TERMS & CONDITIONS:

The applicant agrees to pay the account balance in full 30 days from the date of invoice. Past due account balances are subject to a 1.5% service charge. Accounts determined to be delinquent by the creditor are subject to termination of credit. The customer agrees to pay all collection costs incurred by the creditor including attorney fees for services rendered by suit or otherwise.

The above information is submitted in order to establish a credit account. The applicant's signature authorizes the above named credit references to furnish credit information and affirms that the applicant is in agreement with the terms and conditions established by the creditor.

Signature

Date

