

Hoselton Auto Mall Application for Business Credit

Hoselton Chevrolet, Inc			Hoselton Nissan, Inc						
GENERAL INFORMATION									
Today's Date:									
Business Name:			Business Phone:						
Address:	P.O. Box:								
City: State:		Zip:							
Type of Business:			Years in Operation:						
Years at Current Location:			Previous Address (if current is less than 2 years):						
BUSINESS CREDIT REFERENCES									
Name of Firm:	Address:		City:		State:	Zip:	Phone:		
IF INCORPORATED IF PARTNERSHIP / SOLE PROPRIETOR							PROPRIETOR		
President:			Partner / Proprietor:						
Address:			Address:						
City, State, Zip:			City, State, Zip:						
Vice President:			Date of Birth:						
Address:			Social Security #:						
Accounts Payable Contact:									

Phone:

Ext:

Name:

BANK REFERENCE						
Business Name:	F	Branch:				
City:	State:		Zip:			
Loan Officer:	ŀ	Phone:				
Checking Account #:		Other Accounts:				
Do you use Purchase Orders? YES NO						
Desired Hoselton Accounts: Chevrolet / GM YES NO Nissan YES NO Toyota / Scion YES NO						
Credit Amount Requested						
The undersigned certifies that the information on this application is true and correct. You are authorized to investigate my credit record from time to time in connection with this application or my renewal, update, or credit extension and to report performance on this account to credit bureaus and other persons. Our terms are net 30 days. Statements are processed on the 25 th of each month.						
Date:						
Payment Guarantee Signature:		Title:				

Payment Guarantee must be signed.

Please fax to 585-381-7006 and mail original to:

Hoselton Auto Mall

Attn:______ 50 Marsh Road

East Rochester, NY 14445