PHONE: (412) 920-7190 • 1-800-458-1222 • FAX: (412) 920-7197 500 Cherrington Pkway, Suite 131 • Moon Township, PA 15108 PittsburghWire.com

CONFIDENTIAL CREDIT APPLICATION

Please complete this form with all required information.

Email the signed form to awalker@pittsburghwire.com

Your signature also authorizes your bank to release credit information.

Name of Compar	ny:			
Bill To:			Ship To:	
Phone No.:			Email:	
Accts. Payable Contact:			Phone No.:	
This company is	a: Corporation	☐ Co-Partner	☐ Ind. Business	s □ Other
Type of Business	:			
Tax Exempt No.:			(please	email copy of certificate.
Name of Bank:			Contact:	
Phone No.:			Fax:	
Location:				
Account Number:			☐ Business Checki	ng 🗆 Savings
We require four	trade references, p	olease list them	below:	
Name	Address	Phone	Ema	ail
Signature:			Title:	Date: