

CREDIT APPLICATION

Maryland Delivery
9210 Wightman Road #210
Gaithersburg, MD 20886
Tel: 301-417-6900
Fax: 301-417-9547

Please print out the following credit application and, once completed, fax it to: 301-417-9547.

Company Name

PICK-UP ADDRESS

Address		Suite/Room
City	State	Zip Code
Phone	Fax	
Contact Name		

BUSINESS TYPE

Sole Proprietorship _____	Partnership _____	Corporation _____
Years in Service	D & B Number	
Federal ID#	Est. Monthly Deliveries	

OWNERS, PARTNERS OR OFFICERS

1. Name	Title
2. Name	Title

BANK REFERENCE

Bank	Account Number
Contact Person	Phone Number

TRADE REFERENCES

1. Company	Account #
2. Company	Account #

The above information is submitted for opening an account. I do hereby certify this information is true.

Signed

Title

Date

Please call to confirm receipt of this order form.

Office 301-417-6900

Fax 301-417-9547

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