



CUSTOMER CREDIT APPLICATION

Business information

Business Name		Type of Business			Contact		Title										
Business Address		City State Zip Country			Email Address		Phone										
Federal Tax ID #		Corp State ID #		State of Incorporation		Date Established (mm/yy)		Business Structure		Tax Exempt ?							
								CORP		LLC		OTHER		Yes		No	

Owner's information

Owner Name		Title		Personal Phone Number		Social Security Number		Percentage of Ownership		Date of Birth			
Home Address		City			State		Zip		Country			Signature	
Owner Name		Title		Personal Phone Number		Social Security Number		Percentage of Ownership		Date of Birth			
Home Address		City			State		Zip		Country			Signature	

Bank References

Bank Name				City		State		Contact Officer		Checking Account #		Savings Account #		Loan Account #		Email		Phone	
Bank Name				City		State		Contact Officer		Checking Account #		Savings Account #		Loan Account #		Email		Phone	

Credit References

Company Name		Contact		Email Address		Phone		Notes	
Company Name		Contact		Email Address		Phone		Notes	

Credit Requested

Credit Limit Amount		Terms		Type of Payment		Notes	
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Credit Release Authorization

We hereby authorize the release of any and all credit information to IEION Corporation and certify that all is true and correct to the best of my knowledge. The undersigned individual, recognizing that his or her individual credit history may be a factor in the evaluation of the credit application, hereby consents to and authorizes IEION CORPORATION and any assignee, lender or funding service that may be utilized to obtain and use a consumer credit report on the undersigned, now and from time to time, as may be needed in the credit evaluation and review process and waives any right or claim that he/she would otherwise have under the Fair Credit Reporting Act in the absence of this continuing consent. A photocopy or facsimile copy of this authorization shall be valid as the original.

Signature		Title		Date	
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