



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

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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