

# Modular Building Systems International (MBSI)

## Credit Application

13340 West Colonial Dr., #250  
Winter Garden, Florida 34787  
407-905-9951/ Fax 407-905-0521

### CREDIT APPLICATION

FULL LEGAL NAME OF COMPANY \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE: ( ) \_\_\_\_\_ FAX: ( ) \_\_\_\_\_

CORPORATION  PARTNERSHIP  PROPRIETORSHIP

PLEASE LIST NAME & PHONE # OF PERSON AUTHORIZED TO ENTER LEASE OR SALE  
AGREEMENT \_\_\_\_\_

INSURANCE COMPANY: \_\_\_\_\_

AGENT & PHONE # \_\_\_\_\_

TYPE OF BUSINESS: \_\_\_\_\_

YEARS IN BUSINESS \_\_\_\_\_

TAX EXEMPT:  YES  NO TAX NUMBER: \_\_\_\_\_

DO YOU USE PURCHASE ORDERS:  YES  NO

TRADE REFERENCES (MATERIAL, SUPPLIERS OR RENTAL COMPANIES)

COMPANY & CONTACT \_\_\_\_\_ ACCOUNT # \_\_\_\_\_ PHONE \_\_\_\_\_

COMPANY & CONTACT \_\_\_\_\_ ACCOUNT # \_\_\_\_\_ PHONE \_\_\_\_\_

COMPANY & CONTACT \_\_\_\_\_ ACCOUNT # \_\_\_\_\_ PHONE \_\_\_\_\_

BANK NAME \_\_\_\_\_ BRANCH \_\_\_\_\_

ACCOUNT TYPE: \_\_\_\_\_ ACCOUNT # \_\_\_\_\_

CONTACT PERSON & TITLE \_\_\_\_\_ PHONE# \_\_\_\_\_

Please release the necessary information to Modular Building Systems for Credit Authorization.  
I/we do hereby authorize any bank and/or supplier or other creditor to disclose the details of our  
dealings to Modular Building Systems Int'l.

\_\_\_\_\_  
AUTHORIZED SIGNATURE TITLE DATE

**Fax completed application or mail to address above: ATTN: Patti Berk**

**TEL : (407) 905-9951 FAX: (407) 905-0521**