



# CREDIT APPLICATION

Phone # 1-877-929-2200  
Fax # 1-877-959-2200

## DEALER INFORMATION - (please print)

( )

Full Business Name	Year Started	Business Phone Number	
Street Address	City	State	Zip
Mailing Address (If different from above)			
Landlord or Mortgage Holder of Business	How Long at this Address	Rent or Mortgage Amount	
Current Central Station	Number of Accounts	New Installations per Month	# of Employees
Type of Business	<input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/>	( )	
Federal Tax Id Number	Accounts Payable Contact	Direct Phone Number	

## OWNERS AND OFFICERS

( )

Name	Home Phone Number	Social Security Number	
Home Address	City	State	Zip
Name	Home Phone Number	Social Security Number	
Home Address	City	State	Zip
Name	Home Phone	Social Security Number	
Home Address	City	State	Zip

## BUSINESS CHECKING ACCOUNT

Bank Name	Account Number
Address	City State Zip
Contact Name	Contact Phone Number

## MAJOR TRADE REFERENCES

( )

Name	Phone Number	Contact Person	Years Experience
Address	City	State	Zip
Name	Phone Number	Contact Person	Years Experience
Address	City	State	Zip
Name	Phone Number	Contact Person	Years Experience
Address	City	State	Zip

## SIGNATURE ( Owner, Partner, LLC Member, Corporate Officer )

Monitoring Partners is authorized to investigate our credit and to have information released to Monitoring Partners relating to our credit experience with all other parties. The Dealer mentioned herein, wishes to transact business with Monitoring Partners as a buyer of products and or services, and for good and valuable consideration, including the Installer Agreement, the undersigned individually and personally guarantees payment and performance of all obligations now existing or hereafter arising on the products sold and or the services rendered of any and any nature, to the end that the undersigned shall be jointly and severally liable with the dealer for all such obligations owing to Monitoring Partners.

Authorized Signature	Name (please print)	Title	Date
Authorized Signature	Name (please print)	Title	Date