



4ProDiamond
 2321 Distribution Cir
 Silver Spring, MD 20910
 T: 240-405-7991 F: 240-439-4038
 Email: accounting@4prodiamond.com

Credit application

Company Name: _____

Address: _____

Phone : _____ Fax : _____

Business type : _____

President : _____ Buyer : _____

Delivery address (if different from the one below) : _____



Accounts payables : _____

Phone : _____ Fax : _____

Email address: _____

Accounts payable

Bank name : _____



Address : _____

Account number : _____
#Transit #Bank #Account



Phone : _____ Contact : _____

REFERENCES



1)Name

Phone  _____
 Email  _____


2)Name

Phone  _____
 Email  _____

3)Name

Phone  _____
 Email  _____

4)Name

Phone  _____
 Email  _____

Credit limit required : _____

Completed by: _____ Date : _____

PLEASE E-MAIL THIS APPLICATION accounting@4prodiamond.com

IMPORTANT

- note that payment terms are 30 days.
- Please make payment to 4prodiamond.

Initials : _____