

City of Toyah Credit Application

PO Box 144 Toyah, TX 79785

Phone/ Fax 432-259-3908 email: cityoftoyah1@yahoo.com

Business Contact Information

Business Trade Name; _____

Phone _____ Fax _____ Email _____

Address _____

City _____ State _____ Zipcode _____

In Business Since _____

Business and Credit Information

Bank Name _____ Contact person _____

Address _____ City _____ State _____

Zip Code _____ Phone Number _____ Fax _____

Business/ Trade References

Company Name _____ Contact Person _____

Address _____ Phone Number _____

City _____ State _____ Zip _____ Email _____

Company Name _____ Contact Person _____

Address _____ Phone Number _____

City _____ State _____ Zip _____ Email _____

Company Name _____ Contact Person _____

Address _____ Phone Number _____

City _____ State _____ Zip _____ Email _____

Agreement

1. By submitting this application, you authorize The City of Toyah to make inquiries into the banking and trade references that you have provided.
2. All invoices must be paid by the 15th of the month; a late charge of 1.5% of the balance will be accessed as a late charge.
3. Any collection charges/ attorney's fee will be paid by the customer.

Signatures

I agree that all information is true and accurate and will abide by the aforementioned agreement.

Signature _____ Date _____

Printed Name _____ Title _____