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Credit Application

 Legal Business Name Parent Company or Franchise

 Address City State Zip/Postal Code Country

 Phone FAX Web Site URL

Owner(s) Name and Complete Home Address (If Privately-held)

1) _____ 2) _____

Bank Reference

Bank _____ Contact _____
 Address _____ Phone _____ FAX _____
 City, State, Zip _____ Account # _____

Trade References

1) Company _____ Contact _____
 Address _____ Phone _____ FAX _____
 City, State, Zip _____ Account # _____

2) Company _____ Contact _____
 Address _____ Phone _____ FAX _____
 City, State, Zip _____ Account # _____

3) Company _____ Contact _____
 Address _____ Phone _____ FAX _____
 City, State, Zip _____ Account # _____

CONFIRMATION OF INFORMATION ACCURACY AND RELEASE OF AUTHORITY TO VERIFY

I hereby certify that the information in this credit application is correct. The information included in this credit application is for use by AVANU in determining the amount and conditions of credit to be extended. Further I hereby authorize the bank and trade references listed in this credit application to release the information necessary to assist AVANU in establishing a line of credit.

 Owner or Corporate Officer Signature Name & Title (Print) Date