



**FLAME TECH INC.**  
Confidential Credit Application  
(Please fax this form to 336-661-7969)

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To: Flame Tech Inc.  
Ph: 1-800-638-3160  
Fx: 1-336-661-7969

From: \_\_\_\_\_  
Date: \_\_\_\_\_

Business Name: \_\_\_\_\_

Shipping Address: \_\_\_\_\_  
\_\_\_\_\_

Business Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Accounts Payable Contact Name: \_\_\_\_\_

Federal Tax ID Number: \_\_\_\_\_

- Proprietorship
- Partnership
- Corporation

Billing Address: (If different from shipping) \_\_\_\_\_  
\_\_\_\_\_

**Trade References #1:**

Company: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Trade References #2:**

Company: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Trade References #3:**

Company: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Trade References #4:**

Company: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

We certify that all the information on this form is correct, and we fully understand that our credit terms are Net 30 days and agree to the proper payment in consideration of extended credit. In addition, by signing this agreement, we give permission to the above references to release the information needed to open this account.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_