



**Credit Application**

COMPANY NAME: \_\_\_\_\_

COMPANY ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ WEBSITE ADDRESS: \_\_\_\_\_

CORPORATION \_\_\_\_\_ PARTNERSHIP \_\_\_\_\_ INDIVIDUAL \_\_\_\_\_

FEIN: \_\_\_\_\_ BUSINESS START DATE: \_\_\_\_\_

INCORPORATED IN THE STATE OF: \_\_\_\_\_ ANNUAL SALES: \_\_\_\_\_

D & B NUMBER: \_\_\_\_\_ CREDIT AMOUNT REQUESTED: \_\_\_\_\_

Desired Services: (please check all that apply)

Air Charter     Air Freight     Hand Carry     Expedited Trucking     FBO Services

**If this credit application is for multiple locations, you must provide a complete list of all locations. List must provide company name, physical address, phone number and contact name.**

**OFFICERS OR OWNERS:**

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

**PERSON TO CONTACT REGARDING FINANCIAL MATTERS:**

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

PHONE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

**ACCOUNTS PAYABLE CONTACT INFORMATION:**

NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**BANKING INFORMATION**

BANK NAME: \_\_\_\_\_

BANK ADDRESS: \_\_\_\_\_

ACCOUNT NUMBER: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_

**TRADE CREDIT REFERENCES - ALL fields are required below, separate list is acceptable.**

COMPANY NAME: \_\_\_\_\_

PHONE #: \_\_\_\_\_

EMAIL: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_

PHONE #: \_\_\_\_\_

EMAIL: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_

PHONE #: \_\_\_\_\_

EMAIL: \_\_\_\_\_

We hereby certify that the above information to be true and correct. We accept financial responsibility to pay invoices per terms set forth in this application. We hereby authorize Grand Aire, Inc. to collect information from the third parties as listed by us. Further, we authorize our bank to release the pertinent information requested, for our credit application, to Grand Aire, Incorporated.

Payment terms: Net 30 days, payable in U.S. Dollars. Balances over 30 days will be charged 2% per month. No additional credit will be extended on past due accounts until the account is brought to current. Any legal fees and collection expenses are the responsibility of the applicant. Any services paid via credit card will have a 5% processing fee added to the amount of the services. Grand Aire, Inc. submits all invoices electronically. Please note that we do **not** bill third party locations.

**\*\*No alterations permitted to any part of this application.** If you would like to discuss terms, conditions, or have any questions please contact us. You may attach a company information sheet; however, you must complete any missing information not on your company information sheet. Please make sure you sign the credit application and return to me.

**Accepted and agreed to:**

Owner/Officer Name: \_\_\_\_\_

Owner/Officer Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return completed credit application to: [credit@grandaire.com](mailto:credit@grandaire.com)**