



CHAUTAUQUA COUNTY LANDFILL

3889 Towerville Road
Jamestown, NY 14701
Tel: 716-985-4785
Fax 716-985-4981

CREDIT APPLICATION

Company Legal Name:

Office Use Only:

Street :

Application Reviewed By:

City, State, Zip:

Application Reviewed By:

Years at this location:

Application Approved By:

Contact Person Name:

Amount of credit approved:

Contact Person E-mail:

ASSIGNED WW ACCOUNT #

Phone:

APPROVAL DATE:

Cell:

BUSINESS

Proprietorship Partnership Corporation LLC Year & State Incorporated FEIN

List Owners or Partners names & S.S. Numbers

1)

2)

3)

4)

Years in Business D&B Rating Type of Business Have you or your business ever filed Bankruptcy?

Parent Company Company website

Parent Company Address

President/Owner

Controller

Accounts Payable

Line of Credit Desired \$

BANK REFERENCE

Name of Bank:

Checking Account #

Address:

Savings Account #

City, State Zip:

Loan Account #

Name of Account Holder:

Phone Number

TRADE REFERENCE (List any other landfill facilities first)

Name:

Acct #

Address:

Phone Number

Name:

Acct #

Address:

Phone Number

Name:

Acct #

Address:

Phone Number

The undersigned (Applicant) certifies that the information provided in this application is true and complete.

The undersigned (Applicant), also, agrees to the following terms:

- All invoices are due and payable on receipt. If an invoice remains unpaid after thirty (30) days from date of issue, a finance charge will be imposed at the rate of 1 1/2 % per month. The interest rate imposed on past due accounts is subject to change without notice.
- The County is hereby authorized to inquire into and obtain from any bank, credit agency or credit reference agency, whether listed above or not, any and all information relating to the applicant's creditworthiness or financial condition.
- Credit extension may be revoked at any time, with or without cause.

SIGNATURE

TITLE

Printed Name

DATE