



**Burton Technical Services, LLC**

1214 Metro Park Blvd Ste 101  
Lewisville, TX 75057  
Office: (972) 353-0900  
Fax: (972) 353-3033  
accounting@btsatm.com

# Credit Application

**Applicant's Business Name:** \_\_\_\_\_

Parent Company: \_\_\_\_\_

Billing Address: \_\_\_\_\_

\_\_\_\_\_

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

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

Date Established: \_\_\_\_\_

Federal ID#: \_\_\_\_\_

## OWNERS & PRINCIPAL OFFICERS

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

## ADDITIONAL CONTACTS

Accounting Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Purchasing Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_



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**BANK REFERENCE**

Bank Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Primary Account Holder: \_\_\_\_\_ Account#: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**TRADE REFERENCES**

**1) Company Name:** \_\_\_\_\_

Contact: \_\_\_\_\_

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

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

Email: \_\_\_\_\_



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**2) Company Name:** \_\_\_\_\_

Contact: \_\_\_\_\_

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

\_\_\_\_\_

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

Email: \_\_\_\_\_

**3) Company Name:** \_\_\_\_\_

Contact: \_\_\_\_\_

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

\_\_\_\_\_

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

Email: \_\_\_\_\_



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**4) Company Name:** \_\_\_\_\_

Contact: \_\_\_\_\_

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

\_\_\_\_\_

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

Email: \_\_\_\_\_

**Terms & Conditions**

Applicant’s signature certifies that all information provided is true and accurate. As part of this application for credit, applicant grants permission to Burton Technical Services LLC to contact any or all bank and trade references listed above, as well as any additional references which may be provided by the bank and trade references. Burton Technical Services LLC assures the applicant that all information obtained will be held in strict confidence. Applicant’s signature also attests to the financial responsibility, ability, and willingness to pay all invoices issued by Burton Technical Services LLC in accordance with the payment terms agreed upon and specified upon approval of this application. Applicant consents to the jurisdiction of the Courts of the State of Texas.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_