



# MAGIC BAIT COMPANY, INC.

*Manufactures of Quality Fish Bait*

**Magic Bait Co.**  
**Post Office Box 1421**  
**Guthrie, Oklahoma 73044**  
**Phone: (405) 282-8040**  
**Fax: (405) 282-2251**  
**Email: kingkat@magicbait.com**

## CREDIT APPLICATION

**Company Name** \_\_\_\_\_ **Type of Business** \_\_\_\_\_

Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Individual \_\_\_\_\_ Other \_\_\_\_\_

**Billing Address** \_\_\_\_\_

Street or Box \_\_\_\_\_ City, State, Zip \_\_\_\_\_

**Shipping Address** \_\_\_\_\_

UPS or Freight Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

**Contact Name** \_\_\_\_\_ **Phone Number** \_\_\_\_\_

**Date Business Established** \_\_\_\_\_

**Name of Bank** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Type of Account** \_\_\_\_\_

**List Principals in Company and Give Name, Address, and Phone Numbers**

\_\_\_\_\_  
 \_\_\_\_\_  
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Please provide at least three (3) trade references that can provide us with a credit report. Give name, address, phone number and fax number.

Name	Address	Phone Number	Fax Number
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This information provided is for the purpose of obtaining credit from your firm. By signing below, I hereby bind myself to pay all amounts due you by my firm or myself. My signature also authorizes you to inquire into my payment history with the above mentioned entities.

**Customer Signature** \_\_\_\_\_ **Date** \_\_\_\_\_



**"TIME SPENT FISHING IS TIME WELL SPENT"**

