



**LONG & SILVERMAN PUBLISHING, INC.**  
**BUSINESS CREDIT APPLICATION**

800 North Rainbow Blvd.  
Suite 208  
Las Vegas, NV 89107  
Phone: (702) 948-5073

For fast credit approval  
please fax this form to:  
(702) 447-9733  
Attn: Credit Division

COMPANY NAME \_\_\_\_\_ TYPE OF BUSINESS \_\_\_\_\_ TAX ID \_\_\_\_\_

CONTACT NAME \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_ FAX NUMBER \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_ SHIPPING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TYPE OF OWNERSHIP:  CORPORATION  LLC  LP  SOLE PROPRIETOR YEARS IN BUSINESS: \_\_\_\_\_

GOVERNMENT  NON-PROFIT

TAX EXEMPT? YES / NO

(IF YES, PLEASE INCLUDE COPY OF RESALE  
CARD/PERMIT WITH APPLICATION)

PARENT COMPANY NAME (IF DIFFERENT THAN ABOVE) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**BANK REFERENCES**

1. NAME \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_ FAX NUMBER \_\_\_\_\_

ACCOUNT NUMBER \_\_\_\_\_ CONTACT \_\_\_\_\_

2. NAME \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_ FAX NUMBER \_\_\_\_\_

ACCOUNT NUMBER \_\_\_\_\_ CONTACT \_\_\_\_\_

**OPEN ACCOUNT REFERENCES**

1. \_\_\_\_\_  
NAME PHONE NUMBER FAX NUMBER

\_\_\_\_\_  
ADDRESS CITY STATE ZIP

2. \_\_\_\_\_  
NAME PHONE NUMBER FAX NUMBER

\_\_\_\_\_  
ADDRESS CITY STATE ZIP

3. \_\_\_\_\_  
NAME PHONE NUMBER FAX NUMBER

\_\_\_\_\_  
ADDRESS CITY STATE ZIP

AUTHORIZED SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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

INTER OFFICE USE ONLY DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

CREDIT LIMIT: \_\_\_\_\_ ACCOUNT NUMBER: \_\_\_\_\_ APPROVED BY: \_\_\_\_\_