



TORSTENSON GLASS CO
3233 N SHEFFIELD AVE
CHICAGO, IL 60657-2210
773-525-0435 FAX-525-0009
FLAT GLASS SINCE 1889

COMMERCIAL CREDIT APPLICATION

APPLICATION INFORMATION

Date: _____

Company Name: _____

Address: _____

Type of Business:

City, State, Zip: _____

Sole Proprietorship _____

Phone: _____ **Fax:** _____

Partnership _____

Email: _____

Corporation _____

Number of years in business: _____ **Resale No.:** _____

Individual _____

OWNERSHIP INFORMATION

Name of Owner: _____

Phone: _____

Home Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Name of Owner: _____

Phone: _____

Home Address: _____ **City:** _____ **State:** _____ **Zip:** _____

TRADE REFERENCE

Company Name: _____

Phone: _____

Address: _____

Email: _____

City, State, Zip: _____

Fax: _____

Company Name: _____

Phone: _____

Address: _____

Email: _____

City, State, Zip: _____

Fax: _____

Company Name: _____

Phone: _____

Address: _____

Email: _____

City, State, Zip: _____

Fax: _____

BANK REFERENCE

Bank Name: _____

Phone: _____

Address: _____

Contact: _____

Approved:

Date:

Credit Limit:

Customer Type:

Account:

Yes ____ No ____
