



Safety Emporium
 PO Box 1003
 Blackwood, NJ 08012
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 Toll-Free: (866)-326-5412 Fax: (856) 553-6154

Commercial Credit Application

Your Company Name: _____

Other Names Used By Your Company: _____

Accounts Payable Contact & Title: _____

Mailing Address: _____

Telephone: () _____ Fax: () _____

Email: _____ Web address _____

Federal Tax ID Number: _____

Has your company ever declared bankruptcy? _____

Please list companies with which you make substantial or regular purchases on credit.

Reference 1	Reference 2
Company:	Company:
Address:	Address:
Contact name:	Contact name:
Ph:	Ph:
Fax:	Fax:
Account #	Account #
Reference 3	Reference 4
Company:	Company:
Address:	Address:
Contact name:	Contact name:
Ph:	Ph:
Fax:	Fax:
Account #	Account #

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Banking reference

Bank Name: _____

Address: _____

Phone: _____

Fax: _____

Account number (required): _____

This information was completed by (print name) _____

Title _____

Date _____

I, the undersigned, hereby give permission for Interactive Learning Paradigms Incorporated (dba "ILPI" and "Safety Emporium") to contact the references provided for the purpose of determining the creditworthiness of my company:

(Signature)