

# Five Star Aviation

## CREDIT APPLICATION FOR A BUSINESS ACCOUNT

### BILLING AND CONTACT INFORMATION

Company Name				
Street No.	Apt/Ste		Street Name	
Phone No.	Fax		Email	
How long have you been at this location?				

### BUSINESS AND CREDIT INFORMATION

Bank Name			Contact		
Bank Address					
City	State		Zip		
Phone		Fax			

### BUSINESS / TRADE REFERENCES

Company			Contact (Required)		
Address					
City	State		Zip		
Phone		Fax (Required)		Email	
Company			Contact (Required)		
Address					
City	State		Zip		
Phone		Fax (Required)		Email	
Company			Contact (Required)		
Address					
City	State		Zip		
Phone		Fax (Required)		Email	

### AGREEMENT

- 1) All invoices are to be paid 30 days from the date of the invoice. Invoices past 60 days will put the company on COD basis for any further purchases.
- 2) Claims arising from invoices must be made within seven working days.
- 3) By submitting this application, you authorize the inquiries to be made into the banking and business/trade references that you have supplied.

### SIGNATURES

Title:	Title:
Date:	Date:

\* If you currently have credit references in PDF format then complete only the top portion, attach references, sign and submit.

\*\* If your company is located in the state of Florida, we will need a copy of your company resale certificate to proceed.

Once completed please fax to 904-829-3606 or email directly to Terry McCarty - [terry@fivestaraviation.net](mailto:terry@fivestaraviation.net)

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