

TEAM PROMARK, LLC  
4725 Nautilus Ct South Unit 3  
Boulder, CO 80301

Phone: (888) 287-0056

Fax: (303) 926-1450

**COMPANY INFORMATION**

Company Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Current Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Current Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_ Fax Number \_\_\_\_\_

Social Security No. or Federal Tax ID No.: \_\_\_\_\_

Print Name of Authorized Representative: \_\_\_\_\_

**BANK REFERENCE**

Bank Name \_\_\_\_\_ Contact \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Type of Account \_\_\_\_\_ Account Number \_\_\_\_\_

**TRADE REFERENCES**

Company Name \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Account No. \_\_\_\_\_ Contact \_\_\_\_\_

Company Name \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Account No. \_\_\_\_\_ Contact \_\_\_\_\_

Company Name \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Account No. \_\_\_\_\_ Contact \_\_\_\_\_

Company Name \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Account No. \_\_\_\_\_ Contact \_\_\_\_\_

**AUTHORIZATION**

I, \_\_\_\_\_, give my authorization to release information to  
(Signature of Authorized Representative)  
**Team ProMark, LLC** in order to obtain a credit report for the purpose of extending credit to the above named company.

**PERSONAL GUARANTY**

For good and valuable consideration, the adequacy of which is acknowledged hereby, the undersigned jointly and severally guarantee the payment of all amounts that may become due to **Team ProMark, LLC** by the applicant.

Signed \_\_\_\_\_ Print Name \_\_\_\_\_

Home Address \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date \_\_\_\_\_

**Please fill out form in its entirety to avoid delays in processing credit application.**