

Ross-Co Redi-Mix Company, Inc.



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Chillicothe, Ohio
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Off: 740.775.4466
Fax: 740.775.4273
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RossCoRediMix@hotmail.com
MyRossCoRediMix.com



Credit Application

Business Name: _____

Business Type: Limited Liability Company: _____ C-Corp.: _____
General Partnership: _____ S-Corp.: _____
Sole Proprietorship: _____

Federal ID Number or Social Security Number: _____

Business Address: _____

City: _____ State: _____ Zip Code: _____

Mailing Address: _____

Phone Number(s): _____

Contact Person: _____ Phone Number: _____

Email Address: _____ Fax Number: _____

Owners' Names – President/CEO, Partners and/or Corporate Officers:

Name: _____ Title: _____

Name: _____ Title: _____

Name: _____ Title: _____

Name of Chief Financial Officer (CFO): _____

Date Business Started: _____

Amount of Credit Requested: _____

Name of Bank: _____ Acct. Number: _____

Current Trade Information

(At Least Three Trade)

(References Required)

1). Business Reference Name/Contact Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email Address: _____

2). Business Reference Name/Contact Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email Address: _____

3). Business Reference Name/Contact Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email Address: _____

Operations Information

Name of Accounts Manager/Accounts Payable Clerk: _____

Phone Number: _____ Fax: _____

Email Address: _____

“For the sole purpose of this Credit Application I, the undersigned Name of Applicant/Borrower, do hereby grant Ross-Co Redi-Mix Company, Inc., unconditional consent to the release of Applicant/Borrower’s financial, personal, and/or professional credit history, pursuant to Title 5 United States Code §552, et al, et seq.”

(Name of Applicant/Borrower)

(Date Credit Application Submitted)