

**The Hudson Valley  
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USA

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PPAI 114212  
ASI 89955  
UPIC 1ASTRMBG  
SAGE 57801



### CREDIT APPLICATION

Thank you for applying for credit with our company. Please provide us with the information listed below so that we may proceed with the necessary credit checks.

Note that if your order has a deadline date, we may not be able to get the information in time to meet your ship date. For in-hand dates, please call us to make other payment arrangements

Please fill out the form below completely. Print with black pen or marker for FAX transmission:

YOUR COMPANY NAME \_\_\_\_\_ ASI NO. \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
PHONE \_\_\_\_\_ FAX \_\_\_\_\_ E-MAIL \_\_\_\_\_

#### BANK INFORMATION:

BANK NAME \_\_\_\_\_ ACCOUNT NO. \_\_\_\_\_  
PHONE \_\_\_\_\_ E-MAIL (IF AVAIL.) \_\_\_\_\_  
FAX \_\_\_\_\_ CONTACT \_\_\_\_\_  
YOUR COMPANY TAX ID NUMBER \_\_\_\_\_

As some banks require an approval from you to release any information, please notify them of this credit check. Thank you, *The Credit Department*

#### CREDIT REFERENCES:

COMPANY NAME _____	COMPANY NAME _____
PHONE _____	PHONE _____
FAX _____	FAX _____
E-MAIL (IF AVAIL.) _____	E-MAIL (IF AVAIL.) _____
CONTACT _____	CONTACT _____

COMPANY NAME \_\_\_\_\_  
PHONE \_\_\_\_\_  
FAX \_\_\_\_\_  
E-MAIL (IF AVAIL.) \_\_\_\_\_  
CONTACT \_\_\_\_\_

**Please respond promptly via return  
FAX only. Thank you.**  
**FAX No: 845-535-3778**  
**StrombergBrand— an award winning company.**

