



Credit Reference Request

We are requesting credit/payment history of the following company

Name: _____ Date _____

Address: _____
Street Address Unit #

City State ZIP Code

Date Account opened: _____

Date of last order: _____

Account terms: _____

High credit last 12 months: _____

Current balance: _____

Credit Limit: _____

Past Due amount:

30 days: _____

60 days: _____

90 days: _____

Payment History: (please check all that apply)

_____ Satisfactory

_____ Prompt to days beyond terms

_____ Slow but collectable

_____ Unsatisfactory

_____ NSF checks

Comments: _____

Thank you for your time. Please send to: AR@unistoneimports.com.

Form completed by:

Name _____ Company Name _____

Title _____ Date _____