

MT. WHEELER POWER

PO Box 151000, Ely, Nevada 89315

CREDIT APPLICATION

APPLICANT INFORMATION

Name (last)	(first)	(middle)	
DOB / /	SS# - -	Phone	
Current address		City, State Zip	
Own Rent (please circle)	Monthly payment/ Mortgage \$	Years at address	
Name of relative not residing with you:	Address	City, State, Zip	Phone

EMPLOYMENT INFORMATION

Current Employer	Address	City, State, Zip	How long
Phone		Position	Hourly Salary (please circle)
Fax		Net Annual Income \$	
E-mail			
Previous Employer	Address	City, State, Zip	How long

CO-APPLICANT INFORMATION

Name (last)	(first)	(middle)	
DOB / /	SS# - -	Phone	
Current address		City, State Zip	
Own Rent (please circle)	Monthly payment/ Mortgage \$	Years at address	
Name of relative not residing with you:	Address	City, State, Zip	Phone
Current Employer	Address	City, State, Zip	How long
Phone		Position	Hourly Salary (please circle)
Fax		Net Annual Income \$	
E-mail			
Previous Employer	Address	City, State, Zip	How long

CREDIT HISTORY

1. All invoices are to be paid 30 days from the date of the invoice.
2. Claims arising from invoices must be made within seven working days.
3. By submitting this application, you authorize MT.WHEELER POWER to make inquiries into the banking and business/trade references that you have supplied.

SIGNATURES

Signature		Signature	
Name and Title		Name and Title	

Date		Date	
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