Renova Customer Credit Application

Innovative Lighting Ideas
Energy Efficient Solutions

NAME

Company Name: _____ Date: _____

Address: _____ Yrs at this address: _____

City: _____ St: _____ Zip: _____

Billing Address: _____

City: _____ St: _____ Zip: _____

AP Email: _____ AP Phone: _____

Contact Email _____ Contact Phone: _____

☐ Corporation ☐ Partnership ☐ Proprietorship

1. _____
2. _____
3. _____

Name of Principal *Title* *Phone #*

Of Empl: ☐ 1-25 ☐ 26-50 ☐ 51-75 ☐ 76-100 ☐ 101+

Annual Sales: _____ Date Est: _____ Duns #: _____

Net Income: _____ Fed ID: _____ Tax Exempt #: _____

BANK REFERENCES

Bank 1: _____ Branch Address: _____

Acct #: _____ Contact/ Bk Offcr: _____

Phone # _____ Fax : _____

TRADE REFERENCES

Contact Name	*Address*	*Company Name*	*Fax #*
Contact Name	*Address*	*Company Name*	*Fax #*
Contact Name	*Address*	*Company Name*	*Fax #*

AUTHORIZATION

The undersigned hereby certifies that submission of this application and acceptance of the terms of the agreement are the duly authorized acts of and are binding upon the buyer. If this application is accepted by RENOVA, the company acknowledges that such application and agreement shall remain in full force and in effect unless otherwise amended, rescinded or terminated by seller. This agreement is deemed to have been made and entered into in the State of Rhode island and shall be construed in accordance with laws of the State of Rhode Island. The information provided herein is true and correct, and the company understands that any false information may result in cancellation of any account which may be established.

Date: _____

Auth Signature: _____ Title: _____