



GREENWAY RECYCLING, LLC

CREDIT APPLICATION

BUSINESS INFORMATION

Business Name:		
Date of formation:	EIN:	Phone:
Current address:		
City:	State:	ZIP Code:
Own Rent (Please circle)	Monthly payment or rent:	How long?
Email address:		

PERSONAL INFORMATION

Name:		SSN :
Home Address:		How long?
Phone:	E-mail:	Fax:
City:	State:	ZIP Code:
Previous employer:		
Address:		How long?
Phone:	E-mail:	Fax:
City:	State:	ZIP Code:
Position:	Hourly Salary (Please circle)	Annual income:

CO-APPLICANT INFORMATION, IF FOR A JOINT ACCOUNT

Name:		
Date of birth:	SSN:	Phone:
Home address:		
City:	State:	ZIP Code:
Own Rent (Please circle)	Monthly payment or rent:	How long?
Previous address:		
City:	State:	ZIP Code:

GUARANTOR INFORMATION

Personal Guarantor:		
Address:		Phone:
City:	State:	ZIP Code:
Relationship:		

OPEN CREDIT ACCOUNTS

Name	Account no.	Current balance	Monthly payment

MORTGAGE COMPANY

Account no.:	Address:
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MISC. CREDIT ACCOUNTS

Account Type	Account no.	Balance	Monthly payment



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OTHER LOANS, DEBTS, OR OBLIGATIONS		
Description	Account no.	Amount
OTHER ASSETS OR SOURCES OF INCOME		
Description	Amount per month or value	
I authorize Greenway Recycling, LLC to verify the information provided on this form as to my credit and employment history.		
Signature of applicant		Date
Signature of co-applicant		Date

Terms, Conditions and Personal Guarantee

Bills are sent on the 1st day and the 15th day of each month.

All bills become payable in full on the 30th day after billing and if not paid by the 30th day may result in revocation of Tipping Privileges.

No additional credit or Tipping Privileges will be extended to past due accounts unless satisfactory arrangements are made with our credit department.

PERSONAL GUARANTEE: If the credit customer is a corporation or Limited Liability Company (LLC) then those signing this application, whether signing as an officer or not, personally guarantee payment for all items purchased on credit by the business entity.

_____ **Date** _____
Signature of Personal Guarantor

_____ **Date** _____
Signature of Co-Guarantor

Print Company Name

Please return completed form to info@recyclegreenway.com