



1775 Old 6 Rd  
 PO Box 535  
 Brooklyn, IA 52211-0535  
 PH: 641-522-9206; Fax: 641-522-9407  
 suemcc@manatts.com

Office Use Only	
Account #:	_____
App Date:	_____
Location:	_____

PERSONAL CONTACT INFORMATION					
Name:					Driver's License #:
Mailing Address:					
City, State, Zip:					
Phone:	Cell:			Fax:	
Email Address:					
Receive Invoices/Statements by Email?	Yes	No	PO Required?	Yes	No
BANK REFERENCE					
Bank Name:					
Bank Address:					
City, State, Zip:					
Contact Person:	Type: Checking	Savings	Const Loan		
Phone:					Fax:
CREDIT REFERENCES					
Company Name:					
Address:					Phone:
City, State, Zip:					Fax:
Email:					
Company Name:					
Address:					Phone:
City, State, Zip:					Fax:
Email:					
EMPLOYMENT INFORMATION					
Current Employer:					How Long?:
Employer Address:					Phone:
City, State, Zip:					Fax:
Email:					Hourly      Salary
Position:					Annual Income:

AGREEMENT	
<p>Applicant's signature authorized Manatt's, Inc., to contact your bank and credit references for the purpose of obtaining credit information. This release and agreement to terms of this application must be signed below before the application can be processed. <b>Please mail application to: Manatt's, Inc., Attn: Credit Mgr, PO Box 535, Brooklyn, IA 52211-0535, fax to : (641) 522-9407, or email: suemcc@manatts.com.</b> CreditSafe will be used for this application. As the applicant, I have listed information for the purpose of obtaining credit with Manatt's, Inc. The information supplied on this application is true and correct. Manatt's, Inc., is authorized to investigate the references listed and other sources to determine my credit standings and financial obligation. I do hereby agree to pay any and all obligations to Manatt's, Inc, within 30 days of the date on the invoice. If, at any time, I fail to meet those terms, I agree to pay interest computed at the rate of 1 1/2% per month on the unpaid balance of the account, not to exceed 18% annually. In the event that Manatt's, Inc., should incur collection costs, charges and expenses, including but not limited to, reasonable attorney fees if the account is placed with an attorney for collection.</p>	
Signature: _____	Date: _____
Application will not be processed without signature.	

