



Cycle News, Inc. Credit Application

Please Fill Out Clearly and Completely.

Firm Name _____

Street Address _____ Phone # _____ Fax # _____

City _____ State _____ Zip _____

Ad Agency (if applicable) _____

Street Address _____ Phone # _____ Fax # _____

City _____ State _____ Zip _____

Please Fill Out The Following Information.

How Long in Business: _____

Officer, Partner's or Owner's Names: _____

Name _____ Home Phone # _____

Home Address _____ City _____ State _____ Zip _____

Name _____ Home Phone # _____

Home Address _____ City _____ State _____ Zip _____

Company Bank _____ Phone # _____

Home Address _____ City _____ State _____ Zip _____

Checking Acct # _____ Savings Acct # _____

Loan Acct # _____ Loan Acct # _____

(Please complete attached Authorization To Release Banking Information.)

List the names, addresses and phone numbers of four references you are currently doing business with.

(No C.O.D. accounts, please)

1. Name _____ Phone # _____ Fax # _____

Address _____ City _____ State _____ Zip _____

2. Name _____ Phone # _____ Fax # _____

Address _____ City _____ State _____ Zip _____

3. Name _____ Phone # _____ Fax # _____

Address _____ City _____ State _____ Zip _____

4. Name _____ Phone # _____ Fax # _____

Address _____ City _____ State _____ Zip _____

I understand and agree that our credit limit is to be based on the information above.

Signature _____

Title _____ Date _____

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(770) 279-0304 Fax (770) 279-0360