## ROYAL CHAIN GROUP



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CREDIT APPLICATION- SUBJECT TO VERIFICATION, WILL BE REVIEWED ONLY WHEN FULLY COMPLETED AND SIGNED IN BOTH PLACES INDICATED. (\*)

Company Name				
Trade Name (if Differ	ent)			
Address				
City		S	State	Zip
Telephone			Fax	
Email Address			Referred By	
Type of Organization:	:	T	Гуре of Business:	
Corporatio	n Partne	rship	Wholesaler Chain Department Internet	ManufacturerIndependent
Individual (	Owner		☐ Store ☐ Company	Jeweler
Number of years in b	usiness:			
Name of Principals or Owners:			Are you listed in the JBT Directory: JBT #	Yes No
Name		Title	Member of Buying Group?	
Name		Title	Your website address:	
			Request Catalog:	☐ Yes ☐ No
Credit Card Number	Expiration Dat	e Securiy Code	e CVV	
Person in charge of Accounts Payable:			Credit Amount Requested:	
Bank Reference:				
Name of Institution		(	City, State	Account #
Phone #		F	Fax # (Required)	Bank Officer
Trade References:				
Name	City, State	Phone #	E-mail or Fax # (REQUIRED)	Person to Contact
Name	City, State	Phone #	E-mail or Fax # (REQUIRED)	Person to Contact
Name	City, State	Phone #	E-mail or Fax # (REQUIRED)	Person to Contact
Name	City, State	Phone #	E-mail or Fax # (REQUIRED)	Person to Contact
Resale certificate #/T	Tax Exempt #			
	The info Ioney Laundering) Complaint pur will be installing and AML Progra	suant to the USA Patriot Act	curate to the best of my knowledge.	
	institute an AML Program due to		tailer	
*SIGNATURE			DATE	
			YOUR COMPANY THE UNDERSIGNED PERSONALLY GUARANTEES THE PI BE ENTITLED TO LOOK TO THE UNDERSIGNED GUARANTOR(S) IMMEDI	
	FERRED TO AN ATTORNEY OR ANY AGENCY I LE ATTORNEY FEES, COURT COSTS AND EXPE		VED BY THE GUARANTOR OR THE APPLICANT TO RCI THE GUARANTOR A WITH.	GREES TO PAY ALL REASONABLE COSTS THEREOF
*SIGNATURE			PRINT NAME	
*Signatures required				March 2021