

**VISKASE COMPANIES, INC.**  
**CONFIDENTIAL CREDIT APPLICATION**  
(Please Type or Print Legibly)

Full **Legal** Name of Company \_\_\_\_\_

Tradestyle (D/B/A) \_\_\_\_\_

Sold to Address: \_\_\_\_\_ Ship to Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_ Contact: \_\_\_\_\_

Fax (\_\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Principals - Names / Titles / Social Security Numbers  
\_\_\_\_\_  
\_\_\_\_\_

Type of Business (i.e., Corporation, Partnership, etc.) & Parent Co. (if applicable)  
\_\_\_\_\_

Date of Incorporation \_\_\_\_\_ Country of Incorporation \_\_\_\_\_

Federal ID # \_\_\_\_\_ DUNS # \_\_\_\_\_ SIC Code (s) \_\_\_\_\_

Secured Creditors \_\_\_\_\_

Accts Payable Contact \_\_\_\_\_ Ext. \_\_\_\_\_ E-mail \_\_\_\_\_

Line of Credit Requested \$ \_\_\_\_\_ Approximate Monthly Usage \$ \_\_\_\_\_

If available, please indicate approximate dollar amount and requested ship date for new order(s): \_\_\_\_\_

Please include your latest fiscal financial statement, or complete the following:

Year Ending _____	Long Term Debt _____
Current Assets _____	Net Worth _____
Fixed Assets _____	Annual Sales _____
Current Liabilities _____	Fiscal Profit (Loss) _____
Business Premises – Value if Owned \$ _____	Mortgage \$ _____
Monthly Rental if Leased \$ _____	Leased from _____
Insurance Carried: Fire \$ _____	Liability \$ _____ Other \$ _____

