

Tennessee Valley Resources, Inc.

Credit Application

P.o. Box 617
Jefferson City, TN 37760

Phone: 865-475-9016
Fax: 865-246-0733

Company Name: _____

Address: _____

City: _____ State: _____ ZipCode: _____

Business Phone: _____ Fax: _____

Sales Tax Exempt# _____ Owners Name: _____

State County doing business in: _____

Home Phone: _____ Cell Phone: _____

Home Address: _____

Social Security: _____ Date of Birth: _____

[REDACTED]
*Bank Reference: _____

Contact Person: _____ Phone: _____

*Trade Reference: _____

Contact Person: _____ Phone: _____

*Trade Reference: _____

Contact Person: _____ Phone: _____

Where will you be marketing this material? _____

How many tons do you estimate you will be moving on a yearly basis? _____

**STATEMENTS ARE MAILED ON THE 1ST OF EACH MONTH AND ARE
DUE AND PAYABLE ON OR BEFORE THE 10TH OF THE SAME MONTH.**

This application and the information provided is a request for the extension of credit for commercial business use only. The applicant authorizes TVR, INC. to obtain written or oral credit report from any credit reporting agency, for applicant, any guarantor or any individual signing this application on behalf of applicant and further authorizes any listed credit reference to provide any and all information requested by TVR, INC. to assist in its credit investigation.

Signature: _____ Date: _____