



**CREDIT APPLICATION FOR  
Kinetica Partners, LLC**

440 Louisiana St., Suite 425, Houston, TX 77002  
[www.kineticallc.com](http://www.kineticallc.com)

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**Instructions:** Complete the following information, attach your most recent copies of the following items (as applicable), and return to the above fax or address as soon as possible:

\* Annual Report    \* Audited Financials    \* Form 10K    \*Form 10Q

**Shipper/ Company Information**

Name: \_\_\_\_\_

Attention: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Accounts Payable Contact (name): \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Marketing Contact (name): \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Credit Contact #1 (name): \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Credit Contact #2 (name): \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

## CREDIT INFORMATION (Continued)

**Business Entity Type (check one):**

Private Corporation     Public Corporation     S-Corporation     Governmental  
 General-Partnership     Limited-Partnership     Sole Proprietor     Nonprofit

Fiscal Year End: \_\_\_\_\_

D&B No: \_\_\_\_\_

Number of Years in Business: \_\_\_\_\_

Description of Business Activity: \_\_\_\_\_  
\_\_\_\_\_

**Officers and Controlling Shareholders**  
(complete only if a Nonpublic Company)

Name	Title	Ownership
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Parent Company**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

D&B No: \_\_\_\_\_ If necessary, will parent guarantee payment?     Yes     No

**Trade References**

**Company/Address**

**Phone/Contact Person**

1. Company:	_____	Phone: _____
		Email: _____
Address:	_____	Fax No: _____
		Contact Person: _____
2. Company:	_____	Phone: _____
		Email: _____
Address:	_____	Fax No: _____
		Contact Person: _____
3. Company:	_____	Phone: _____
		Email: _____
Address:	_____	Fax No: _____
		Contact Person: _____

## CREDIT INFORMATION (Continued)

### Bank Reference

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Contact: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax No: \_\_\_\_\_

1. We hereby authorize Kinetica Partners, LLC to obtain or exchange any information that may be required relative to this Application from any source, including Applicant's financial institutions, trade suppliers, and credit information databases. Applicant authorizes each source to provide such information.

2. The undersigned Applicant certifies that the information supplied on this Credit Application ("Application") is accurate and correct as of the date of this Application.

By: \_\_\_\_\_

Applicant's Signature

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_