



Kirkwood Holding Inc.  
1239 Rockside Road, Parma, OH 44134

Credit Department: 216-362-3828  
Credit Department Fax: 216 362-3827  
E-mail: [credit@kirkwoodholding.com](mailto:credit@kirkwoodholding.com)

Please check the company for which you are applying for credit:

- Swissline Precision LLC
- Techniques LLC
- Toledo Commutator Company
- RTSI LLC

CREDIT APPLICATION

Please print or type:  
Company Name \_\_\_\_\_  
(Legal Entity) \_\_\_\_\_  
Address \_\_\_\_\_  
City / State / Zip \_\_\_\_\_  
Or Province / Town \_\_\_\_\_ Country \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email \_\_\_\_\_  
Subsidiary of: \_\_\_\_\_  
Billing address (if different) \_\_\_\_\_  
Individual or Department responsible for processing payment \_\_\_\_\_ Phone / fax / e-mail \_\_\_\_\_  
Name of Officers or principals\*: \_\_\_\_\_  
In Business since: \_\_\_\_\_ Corporation / Partnership / Sole Proprietor / Individual (Circle one)  
\*If Sole Proprietor, Partnership or Individual, Please add social security numbers \_\_\_\_\_  
Monthly credit line desired: \$ \_\_\_\_\_ Tax Exempt: Yes / No (if yes, attach certificate)

REFERENCES

Name	Address	Contact / Acct. No. / Phone / Fax / e-mail
Bank:		
Trade (1)		
Trade (2)		
Trade (3)		

\*\*\* Please attach copy of current financial statements\*\*\*

Note: Kirkwood Holding Inc. and its subsidiaries extend credit to our customers as a convenience.  
Payment is expected within our terms.

I warrant the above to be true and hereby authorize Kirkwood Holding Inc. or its subsidiaries or any agency employed by Kirkwood to investigate references for the purpose of determining credit and financial responsibility.

Signature of officer: \_\_\_\_\_ Date \_\_\_\_\_

Please print name below signature