

HFI / ME

Pre-Approved Credit Insurance Coverage
Credit Limit Request Form

Date: _ _ _ Customer#

Customer Name(s): _ _ _ _ _

Address:

City, State, Zip:

Telephone #

Fax #

Sales Representative:

Requested Credit Limit:

Bruce Hughes Approval
Signature:

Steve Hunsucker Approval Signature:

Credit Reference Result Summary (For Office
Only)
_ _ _ _ _

