

Credit Applications

Credit Application


BY BUSINESS TYPE

(this first page is different for each type of business)

Munder Difflin Credit Application

Secure | <https://test.aprive.com/apply/munder-difflin>

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Munder Difflin
Business Credit Application

What you'll need to qualify and complete your credit application.

Enter your business email address to access your application for a revolving line of credit with Munder Difflin.

Email

Login/Create Account

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aprive

Enter email
address to start

Munder Difflin Credit Application

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What you'll need to qualify and complete your credit application.

Will I qualify?

Applicants that meet the criteria below have a greater approval rate for credit

- You've been in business for 18 months or longer
- You're not a Sole Proprietor

Things that are helpful for approval

- Having a DUNS # ([Here's how to get one](#))
- Using an email address with your business domain name (ie. username@yourcompany.com).

Information you'll need to complete the application

Depending on your business type, there are various pieces of information that will need to be collected, including, but not limited to:

- Business name and address
- Accounts payable contact
- EIN or Tax ID

[Learn more in our FAQs](#)

Got it

Business

What you'll need to q

to access your credit with


Create Account

Required documentation

Munder Difflin Credit Application

Secure | https://test.aprue.com/apply/munder-difflin/business_information

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Munder Difflin
Business Credit Application

[rachel.e.hollifield@gmail.com \(log out\)](#)

- Business Information
- Applicant Information
- Accounts Payable
- Buyer Agreement

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Business Information

You are about to begin an application for a revolving line of credit with Munder Difflin. If you're unable to finish the application in one sitting, you can come back at any time to complete any remaining information.

Please select your business type


Note: This application is for a business line of credit with Munder Difflin and is not intended for personal use.
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Select type
of business
(from drop down)

Munder Difflin Credit Application

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Business Information **>**

Applicant Information

Accounts Payable

Buyer Agreement

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Business Information

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Please select your business type

- Corporation
- Federal
- LLC
- Municipality
- Partnership
- Private School
- Public School
- Sole Proprietor
- State

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Select type
of business
(from drop down)

The next few slides show the first section of the credit application based on the type of business selected.



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Applicant Information

Accounts Payable

Buyer Agreement

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Please select your business type

Corporation

Corporation


Business Name*	DBA
DUNS Number ex. 123456789	Website Address*
Your Industry*	Federal Tax ID* ex. 12-3456789 or 123-45-6789
Organization State*	Year Established*
Number of Employees*	Requested Credit Limit* \$.00
Requested Payment Term* ⓘ End of Month + Net 15	

Business Address

Address Line 1*

Address Line 2

Corporation
Credit App



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Business Credit Application

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Business Information

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Please select your business type

Federal

Federal


Business Name*	DBA
DUNS Number ex. 123456789	Website Address*
Your Industry*	Federal Tax ID* ex. 12-3456789 or 123-45-6789
Organization State*	Year Established*
Number of Employees*	Requested Credit Limit* \$.00
Requested Payment Term* ⓘ End of Month + Net 15	

Business Address

Address Line 1*

Address Line 2

Federal
Credit App



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Business Information

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Please select your business type
LLC

Business Name*

DBA

DUNS Number

ex. 123456789

Your Industry*

Organization State*

Number of Employees*

Requested Payment Term* ⓘ

End of Month + Net 15

Federal Tax ID*

ex. 12-3456789 or 123-45-6789

Year Established*

Requested Credit Limit*

\$.00


Business Address

Address Line 1*

Address Line 2

LLC
Credit App

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Business Information

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Please select your business type

Municipality

Municipality


Business Name*	DBA
DUNS Number ex. 123456789	Website Address*
Your Industry*	Federal Tax ID* ex. 12-3456789 or 123-45-6789
Organization State*	Year Established*
Number of Employees*	Requested Credit Limit* \$.00
Requested Payment Term* ⓘ End of Month + Net 15	

Business Address

Address Line 1*

Address Line 2

Municipality Credit App



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Business Information

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Please select your business type
Partnership

Partnership


Business Name*	DBA
DUNS Number ex. 123456789	Website Address*
Your Industry*	Federal Tax ID* ex. 12-3456789 or 123-45-6789
Organization State*	Year Established*
Number of Employees*	Requested Credit Limit* \$.00
Requested Payment Term* ⓘ End of Month + Net 15	

Business Address

Address Line 1*

Address Line 2

Partnership
Credit App



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Business Information

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Business Information

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Please select your business type
Private School

Private School


Business Name*	DBA
DUNS Number ex. 123456789	Website Address*
Your Industry*	Federal Tax ID* ex. 12-3456789 or 123-45-6789
Organization State*	Year Established*
Number of Employees*	Requested Credit Limit* \$.00
Requested Payment Term* ⓘ End of Month + Net 15	

Business Address

Address Line 1*

Address Line 2

Private School Credit App



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Business Credit Application

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Business Information

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Please select your business type
Public School

Business Name*

DBA

DUNS Number

ex. 123456789

Your Industry*

Organization State*

Number of Employees*

Requested Payment Term* ⓘ

End of Month + Net 15

Website Address*

Federal Tax ID*

ex. 12-3456789 or 123-45-6789

Year Established*

Requested Credit Limit*

\$.00


Business Address

Address Line 1*

Address Line 2

Public School Credit App

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Business Information

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Please select your business type
Sole Proprietor

Business Name*

DBA

DUNS Number

ex. 123456789

Your Industry*

Year Established*

Requested Credit Limit*

\$.00

Website Address*

Organization State*

Number of Employees*

Requested Payment Term* ⓘ


End of Month + Net 15

Business Address

Address Line 1*

Address Line 2

Sole Proprietor Credit App



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Business Information

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Please select your business type
State

Business Name*

DBA

DUNS Number

ex. 123456789

Your Industry*

Organization State*

Number of Employees*

Requested Payment Term* ⓘ

End of Month + Net 15

Website Address*

Federal Tax ID*

ex. 12-3456789 or 123-45-6789

Year Established*

Requested Credit Limit*

\$.00

Business Address


Address Line 1*

Address Line 2

State
Credit App

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The bottom half of the first portion of the credit application is the same for all business types.



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Organization State*

Year Established*

Number of Employees*

Requested Credit Limit*

Requested Payment Term*
End of Month + Net 15

Address Line 1*

Address Line 2

City*

State or Province*

Country*
United States

Postal Code*
ex. XXXXX or XXXXX-XXXX

Phone Number*
ex. 123-456-7890 or 1234567890


Fax Number
ex. 123-456-7890 or 1234567890

Save & Continue

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Business Address
(this is the same for all
credit applications)

The rest of the credit application
is identical once you have filled
out the **Business Type** page



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Business Credit Application

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Business Information

Applicant Information

Accounts Payable

Buyer Agreement

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Tell us a bit more about yourself so we can create your account.

First Name*

Last Name*

Title*


Email Address*

Phone Number*
ex. 123-456-7890 or 1234567890

Continue

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Applicant
information



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Accounts Payable Contact

Are you the one responsible for paying open invoices?

☐ Yes ☒ No

First Name*

Last Name*

Title*

Email Address*

Phone Number*

[Why is this needed?](#)


ex. 123-456-7890 or 1234567890

[Save & Continue](#)

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Accounts
payable



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Business Information

Applicant Information


Accounts Payable

Buyer Agreement

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Powered by


Accounts Payable Contact

Are you the one responsible for paying open invoices?

☒ Yes ☐ No

First Name*	✓	Last Name*	✓
Title*	✓	Email Address*	✓
Phone Number*	✓	Why is this needed?	


ex. 123-456-7890 or 1234567890

[Save & Continue](#)

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Accounts
payable
(continued)



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Business Credit Application

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Business Information

✓

Applicant Information

✓

Accounts Payable


✓

Buyer Agreement

>

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Buyer Agreement

Are you authorized to apply for credit on behalf of your organization?

☒ Yes ☐ No

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Buyer
agreement



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Business Information

Applicant Information


Accounts Payable

Buyer Agreement

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Buyer Agreement

Are you authorized to apply for credit on behalf of your organization?

☒ Yes ☐ No

Please fill in the appropriate information for the contact at your business that has the authority to sign off on this credit application.

First Name*

Last Name*

Title*

Email*

Phone Number*

ex. 123-456-7890 or 1234567890


Request Signature

REQUEST SIGNATURE

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Buyer
Agreement
(if you select **NO**)



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Business Credit Application

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Business Information

✓

Applicant Information

✓

Accounts Payable


✓

Buyer Agreement

>

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Buyer Agreement

Are you authorized to apply for credit on behalf of your organization?

☒ Yes ☐ No

☐ I agree to the [Terms and Conditions](#) of this credit agreement.

Electronic Signature*

Type your name to represent your electronic signature.

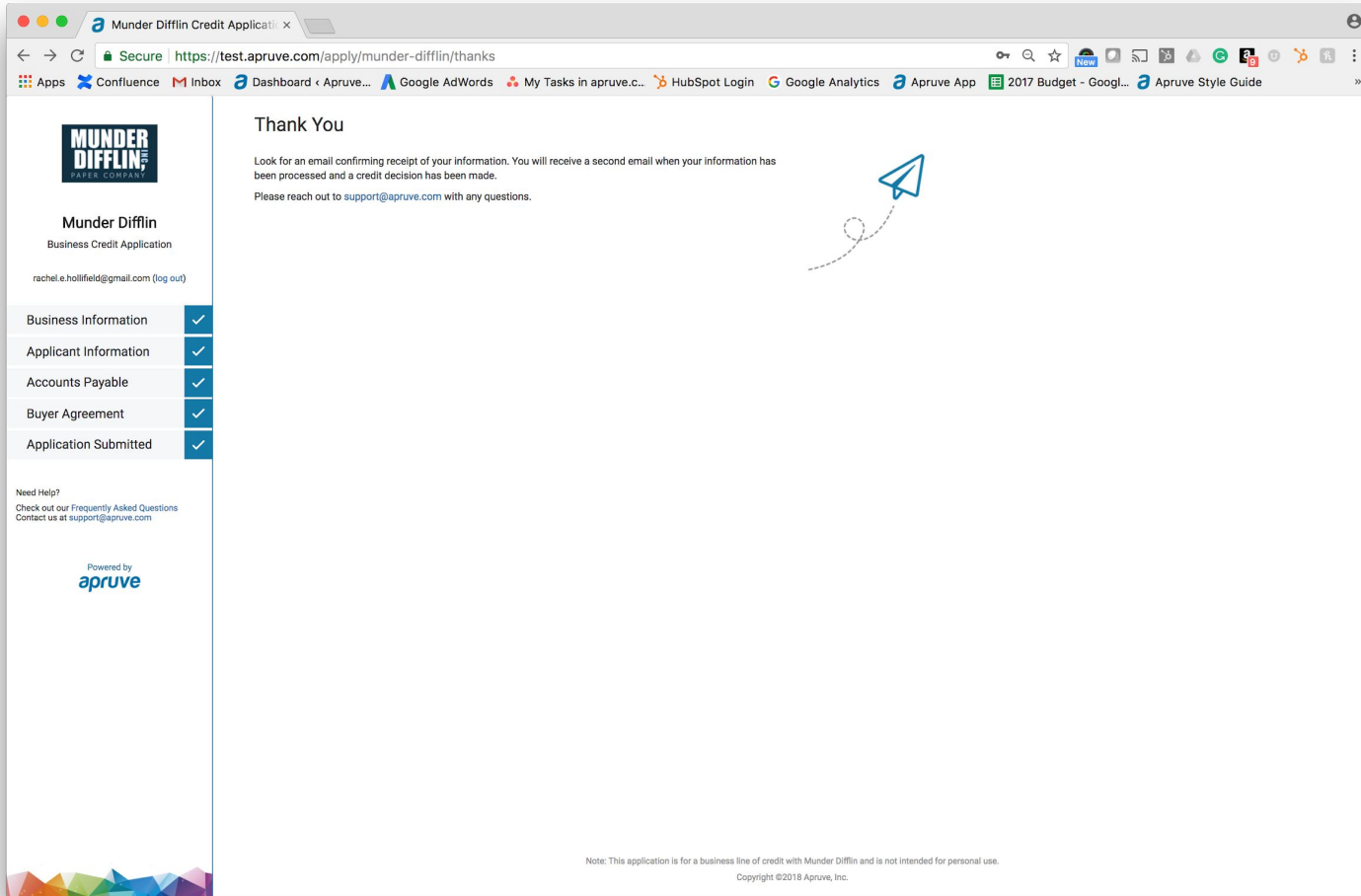
Title*

Owner ✓

[Agree and Submit Application](#)

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Buyer
Agreement
(if you select **YES**)



Finished
Credit App
(Congrats!)

A confirmation email will be sent
once you have submitted the
credit application.