



**ICY DOCK USA CORPORATION**  
*Bank Verification Authorization Form*

Information Required From	
Bank Name:	Date:
Address:	
Phone:	Fax:
Attention:	

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

Please provide the credit reference for the company listed below:

Company Name:	A/c No.
Address:	
Phone:	Fax:

Please render the information requested under and fax this form back to us at **626.667.2149**  
We appreciate your assistance and prompt attention to this matter. A purchase order is pending,  
please responds as quickly as you can. Thank you.

Sincerely,

Credit Department  
ICY DOCK USA Corporation

For Bank Use Only	
Account Open Date:	
Check(s) Bounced: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Average Balance: <input type="checkbox"/> Low ____ Figures <input type="checkbox"/> Mid ____ Figures <input type="checkbox"/> High ____ Figures	
Credit Line Secured:	
Credit Line Unsecured:	
Any Comment About This Account?	
Information Provided By:	Title:
Print Name:	Date:

If you have any question, regarding the information requested above, or, if you like to  
provide above or other information by phone, please feel free to call us.