



BLUE HARVEST
FISHERIES

Blue Harvest Fleet • Blue Harvest Marine Services • Blue Harvest Foods

Bank Authorization Form
Please complete this form in its entirety

Legal Name
(Applicant): _____ DBA: _____

Address: _____ City/State/Zip: _____

Primary Bank Information

Name: _____ Address: _____ Contact: _____

Phone #: _____ Fax #: _____ Email: _____

Account # - Checking: _____ Line of Credit: _____ Other: _____

Secondary Bank Information

Name: _____ Address: _____ Contact: _____

Phone #: _____ Fax #: _____ Email: _____

Account # - Checking: _____ Line of Credit: _____ Other: _____

I/We hereby authorize Blue Harvest Fisheries, LLC to obtain credit information from the above listed bank references.

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Please Return by Fax to 844-870-1420

Credit Office P: 866-559-6058 F: 844-870-1420