

## CREDIT APPLICATION

1. To place an order in any showroom or trade show vendor, you must establish credit.
2. Complete this credit form before attending market.
3. Please bring extra copies with you to leave at showrooms where you place orders.

**\*Note:** Additional photocopies of your credit application may be obtained at the Mart office at no charge.

**Store Name** \_\_\_\_\_

Telephone Number \_\_\_\_\_ Resale Tax Number \_\_\_\_\_

Bill Address \_\_\_\_\_ Shipping Address (if different) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Owner/President**

Type of Ownership: ( ) Proprietorship ( ) Partnership ( ) Corporation ( ) Other

Number of Years in Business \_\_\_\_\_ Number of Years at Current Address \_\_\_\_\_ D & B # \_\_\_\_\_

**Bank Reference:**

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

Address \_\_\_\_\_ Contact Name \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Account Number \_\_\_\_\_

**Other References and Account Numbers - (confirm with your references their willingness to release your credit history):**

Account #	Company Name	Fax Number	E-mail
Account #	Company Name	Fax Number	E-mail
Account #	Company Name	Fax Number	E-mail
Account #	Company Name	Fax Number	E-mail
Account #	Company Name	Fax Number	E-mail
Account #	Company Name	Fax Number	E-mail

\_\_\_\_\_ Check here if cash sales are okay until credit is approved.

We certify that all the information on this form is correct. We fully understand your credit terms and agree to the proper payment in consideration of extended credit.

\_\_\_\_\_  
Signature
Title
Date