

## CREDIT APPLICATION

**Name of Company or Individual**

D/B/A

Phone:

Fax:

Address:

City:

State:

Zip:

**Amount of Credit Requested:**

**Federal ID or Social Security Number:**

**Type of Business:**

Billing Address (if different from above):

Corporation

Partnership

Proprietorship

**Principals or Owners**

Name:

Social Security Number:

Title:

Address:

Phone:

Name:

Social Security Number:

Title:

Address:

Phone:

Name:

Social Security Number:

Title:

Address:

Phone:

Name:

Social Security Number:

Title:

Address:

Phone:

**Bank Reference**

Name:

Address:

City:

Contact:

Zip Code:

Phone:

State:

**Business References**

Company	Address	City/State	Zip	Phone	Contact Name
1. _____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____

FLOORFOLIO FLOORING IS HEREBY AUTHORIZED TO INVESTIGATE AND VERIFY ALL INFORMATION PROVIDED. APPLICANTS SIGNATURE ATTEST TO FINANCIAL RESPONSIBILITY AND WILLINGNESS TO PAY OUR INVOICES IN ACCORDANCE WITH OUR TERMS (NET 30 DAYS). A FINANCE CHARGE OF 1-1/2% PER MONTH WILL BE ADDED TO ALL PAST DUE ACCOUNTS.

Authorized signature: \_\_\_\_\_

Title: \_\_\_\_\_



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