

101 Westcott Way - Dalton, Georgia 30720 706-581-7712

CREDIT APPLICATION FORM BUSINESS CONTACT INFORMATION					
Title		Date business commenced			
Company name	□ Sole proprietorship				
Phone Fax		Partnership			
E-mail	Corporation				
Registered company address		□ Other			
City, State ZIP Code					
BUSINESS AND CREDIT INFORMATION					
City, State ZIP Code		Bank name:			
How long at current address?		Primary business address			
		City, State ZIP Code			
Phone		Phone			
Fax		Account number			
E-mail		Type of account	□Savings □ Checking □ Other		
BUSINESS/TRADE REFERENCES					
Company name		Phone			
Address		Fax			
City, State ZIP Code		E-mail			
City, State ZIP Code Type of account		E-mail Other			
Type of account		Other			
Type of account Company name		Other Phone			
Type of account Company name Address		Other Phone Fax			
Type of account Company name Address City, State ZIP Code		Other Phone Fax E-mail			
Type of account Company name Address City, State ZIP Code Type of account		Other Phone Fax E-mail Other			
Type of account Company name Address City, State ZIP Code Type of account Company name		Other Phone Fax E-mail Other Phone			
Type of account Company name Address City, State ZIP Code Type of account Company name Address	□Savings □ Checking □ Other	Other Phone Fax E-mail Other Phone Fax			

1. All invoices are to be paid 30 days from the date of the invoice.

2. Claims arising from invoices must be made within seven working days.

3. By submitting this application, you authorize [Company Name] to make inquiries into the banking and business/trade references that you have supplied.

SIGNATURES				
Signature		Signature		
Name and Title		Name and Title		
Date		Date		

Email as a pdf to: AnchorCarpetMills@gmail.com