



Application for Credit

Company Name: _____
Phone#: _____ Fax#: _____
Address: _____
City, State, And Zip: _____
Type of Business (Circle one): Corporation Proprietorship Other _____
Date Established: _____ State: _____
Email: _____ A/P Contact: _____

Bill to: (If different from above)

Address: _____
City, State, And Zip: _____

Ship to: (If different from above)

Address: _____
City, State, And Zip: _____

Local Credit References

Company Name _____ Phone# _____ Fax# _____
Address _____
Contact _____ Title/Dept. _____
Account# _____

Company Name _____ Phone# _____ Fax# _____
Address _____
Contact _____ Title/Dept. _____
Account# _____

Company Name _____ Phone# _____ Fax# _____
Address _____
Contact _____ Title/Dept. _____
Account# _____

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Officers, Partners, or Owners Home Address

3533 Mercy Drive, Orlando, Florida 32808 Phone 407.930.0977 fax 407.930.2650
accounting@compassflooring.net



Name _____ S.S. # _____

Phone# _____

Address _____

Name _____ S.S. # _____

Phone# _____

Address _____

Financial Information

I (We) herby authorize the release of information pertaining to:

Checking account # _____

Loan _____

Date account opened _____ Average Balance _____

Bank Name _____

Information Provided by _____ Title _____

I (We) certify that all the information on this form is true and correct. I (We) fully understand the credit terms and agree to the proper payment.

Signature _____ Date _____

PERSONAL GUARANTEE: In further consideration of credit being extended by Creditor to the above named applicant for services to be rendered, whether applicant be an individual or individuals, a proprietorship, a corporation, or other entity, the undersigned guarantor or guarantors each hereby contract and guarantee to Creditor the faithful payment, when due, of all accounts of said applicant for the purchases made after the date of this application. The undersigned hereby waives any and all notices relating to this guarantee. Creditor shall not be required to pursue any other remedies before invoking the benefits of this guarantee. Absent written permission by Creditor, this personal guarantee may not be revoked.

Guarantor's Signature _____ SS# _____ Date _____

Guarantor's Signature _____ SS# _____ Date _____

PLEASE ATTACH COPY OF RESALE CERTIFICATE