

CAL-METRO DISTRIBUTING CO., INC.

"Blanket Wrap Furniture"

500 S. GREENWOOD AVENUE
MONTEBELLO, CA 90640-5196
(323)725-0257 (323)725-1437 Fax

CREDIT APPLICATION

___ INDIVIDUAL ___ PARTNERSHIP ___ CORPORATION

LEGAL NAME(DBA, IF APPLICABLE) _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

BILLING ADDRESS(IF DIFFERENT) _____

YEAR BUSINESS STARTED _____ TAX ID/SOC. SEC. NO. _____

EVER ADJUDGED A BANKRUPTCY?: YES ___ NO ___ PHONE NO. ___/___-___

FAX NO. ___/___-___

BANKING INFORMATION:

CHECKING

BANK NAME & ADDRESS _____
ACCOUNT NO. _____ PHONE NO. _____ DATE OPENED ___/___/___

SAVINGS

BANK NAME & ADDRESS _____
ACCOUNT NO. _____ PHONE NO. _____ DATE OPENED ___/___/___

TRADE REFERENCES:

1.) NAME & ADDRESS: _____
ACCOUNT NO. _____ PHONE NO. ___/___-___ DATE OPENED ___/___/___
FAX NO. ___/___-___

2.) NAME & ADDRESS: _____
ACCOUNT NO. _____ PHONE NO. ___/___-___ DATE OPENED ___/___/___
FAX NO. ___/___-___

3.) NAME & ADDRESS: _____
ACCOUNT NO. _____ PHONE NO. ___/___-___ DATE OPENED ___/___/___
FAX NO. ___/___-___

READ BEFORE SIGNING:

I HAVE COMPLETED THIS CREDIT APPLICATION FOR THE PURPOSE OF PROCURING AND MAINTAINING CREDIT ON AN OPEN ACCOUNT BASIS WITH CAL-METRO DISTRIBUTING CO. INC., AND CERTIFY THAT ALL INFORMATION PROVIDED IS TRUE. I AUTHORIZE CAL-METRO DISTRIBUTING CO. INC. TO INVESTIGATE THE REFERENCES LISTED PERTAINING TO MY/OUR CREDIT AND FINANCIAL RESPONSIBILITY.

ACCOUNTS PAYABLE CONTACT: _____ PHONE NO. ___/___-___

SIGNATURE _____ TITLE _____ DATE _____