

calvinfabrics

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SECTION I - ACCOUNT APPLICATION

Business Name	_____	Date Established	_____
Billing Address	_____ # _____	Phone #	_____
City	_____ State _____ Zip Code _____	Cell #	_____
Street Address	_____ # _____	Fax #	_____
City	_____ State _____ Zip Code _____	Resale #	_____
Type of Business	_____	Business Lic #	_____
<input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship			
General E-mail Address	_____		
Name of Owner/President	_____		
Home Address	_____	Home Phone #	_____
City	_____ State _____ Zip Code _____		

SECTION II - CREDIT APPLICATION (IF APPLYING FOR OPEN TERMS)

<u>BUSINESS NAME</u>	<u>ACCT NUMBER</u>	<u>BUSINESS NAME</u>	<u>ACCT NUMBER</u>
<input type="checkbox"/> Brunschwig & Fils	_____	<input type="checkbox"/> Kravet Fabrics	_____
<input type="checkbox"/> Cowtan & Tout	_____	<input type="checkbox"/> Pindler & Pindler	_____
<input type="checkbox"/> Donghia Textiles	_____	<input type="checkbox"/> Robert Allen	_____
<input type="checkbox"/> Duralee Fabrics	_____	<input type="checkbox"/> Schumacher	_____

<u>BUSINESS NAME</u>	<u>ACCT NUMBER</u>	<u>PHONE NUMBER</u>	<u>FAX NUMBER</u>
1) _____	_____	_____	_____
2) _____	_____	_____	_____
3) _____	_____	_____	_____

Bank Name	_____	Phone #	_____
Address	_____	City	_____ State _____ Zip Code _____
Type of Account	_____	Account Number	_____

I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein. It is further agreed that the undersigned will pay collection expenses, including attorney's fees, which may become necessary to effect collection of this account.

Authorized Signature / Title

Print Name

Date