

WHITE OAK RIVER GIFTS

1680 WHITE OAK RIVER Rd
MAYSVILLE NC 28555
Phone 910-743-0020 Fax 910-743-0022

CREDIT REFERENCE SHEET

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NAME OF BUSINESS _____

BILLING ADDRESS _____

CITY _____ STATE _____ ZIP _____

SHIPPING ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ FAX _____

FEDERAL ID # _____ SALES TAX # _____

HOW LONG HAS BUSINESS BEEN ESTABLISHED _____

IS IT A () SLOE PROPRIETORSHIP () PARTNERSHIP () CORPORATION
TYPE OF CORP _____

COMPANY OFFICERS OR PARTNERS

NAME _____ TITLE _____

ADDRESS _____

PHONE _____ SIGNATURE _____

NAME _____ TITLE _____

ADDRESS _____

PHONE _____ SIGNATURE _____

NAME _____ TITLE _____

ADDRESS _____

PHONE _____ SIGNATURE _____

LIST OF PERSONS AUTHORISED TO CHANGE OR CHARGE ON THIS ACCOUNT

NAME _____

NAME _____

NAME _____

BANKING INFO

BANK NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ NAME OF CONTACT PERSON _____

TRADE REFERENCES

NAME _____ ACCOUNT # _____

PHONE _____ FAX _____

ADDRESS _____

NAME _____ ACCOUNT # _____

PHONE _____ FAX _____

ADDRESS _____

NAME _____ ACCOUNT # _____

PHONE _____ FAX _____

ADDRESS _____

NAME _____ ACCOUNT # _____

PHONE _____ FAX _____

ADDRESS _____

THE ABOVE INFORMATION IS FOR THE PURPOSE OF OBTAINING CREDIT WITH WHITE OAK RIVER GIFTS AND IS WARENTED TO BE TRUE.

I HEARBY AUTHERISE THE PERSONS OR FIRM TO WHOM THIS APPLICATION IS MADE, ANY CREDIT BUREAU OR OTHER INVESTIGATIVE AGENCY EMPLOYED BY SUCH PERSONS, TO INVESTIGATE THE REFERENCES HEREIN LISTED OR STATEMENTS OR OTHER DATA OBTAINED FROM ME OR FROM ANY OTHER PERSON PRETAINING TO MY CREDIT AND FINANCIAL RESPONSIBILITY

PLEASE READ THE ABOVE STATEMENT'S BEFOR SIGNING APPLICATION

APPLICANT'S SIGNATURE _____

TITLE _____ **PHONE#** _____ **DATE** _____