



Confidential Credit Application

A.C. Furniture
P.O. Box 200 Axton, VA 24054
P. 276-650-3356 F. 276-650-9965

Confidential Credit Application
Requested By:
Credit Manager

****DO NOT Include Food,Linen, or Utility Company References****

Company Name: _____

Trading as Name: _____

Billing Address: _____ City, State, Zip: _____

Shipping Address: _____ City, State, Zip: _____

Type of Business: _____ Date Established: _____

Phone Number: _____ Fax Number: _____

Email Address: _____

Business names as listed on Dun & Bradstreet: _____

(If Incorporated) State of Corporation: _____ Year of Corporation: _____

Key Management Members and Owners	Titles	Ownership %

Bank Name: _____ Bank Fax: _____

Address: _____ Account #: _____

City, State, Zip: _____ Contact: _____

Please list five trade references below, including major suppliers			
Reference	City/State	Fax Number	Phone Number

A financial statement is also requested if available. Please include a copy of your sales and use tax exemption certificate.

The above information is provided for the purpose of extending credit to our company on your terms of TBD. To the best of our knowledge and belief, the information is accurate and may be relied upon in making a credit decision. We authorize our bank and suppliers to furnish you any information necessary to complete your evaluation of our credit history.

Signature: _____