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**Sales Office**  
 3505 Veterans Memorial Highway  
 Suite S1  
 Ronkonkoma, NY 11779

**Accounting and  
 Logistics**  
 8180 Granville Road  
 Mount Vernon, OH 43050

## CREDIT APPLICATION

### BILLING / SHIPPING INFORMATION

Official Company Name: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 \_\_\_\_\_

Main Phone: \_\_\_\_\_ Main Fax: \_\_\_\_\_

### BUSINESS INFORMATION

Years in Operation _____	Type of Business _____
Net Worth _____	Sales per Year _____
D&B # _____	Treasurer / Controller _____
President / CEO _____	AP Manager _____
VP / Finance _____	
Email Address _____	

### TRADE REFERENCES

Reference #1 _____	Contact _____
Phone # _____	Email _____
Fax # _____	

Reference #2 _____	Contact _____
Phone # _____	Email _____
Fax # _____	

Reference #3 _____	Contact _____
Phone # _____	Email _____
Fax # _____	

### CUSTOMER'S AUTHORIZATION TO RELEASE TRADE INFORMATION

Attention Trade References: Please provide information on all accounts listed as well as any loan information.

We hereby authorized you to whom this application is made, or your agents to investigate my / our credit worthiness and will provide financial statements, tax returns, etc., as you deem necessary.

Prepared by (signature) \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Please provide us with copies of all tax exemption certificates. Terms of Sale are Net-30 subject to credit approval.

Additional finance charges will be billed for late payments, additional terms available for early pay.