



## **NEW CUSTOMER INFORMATION FORM AND CREDIT APPLICATION**

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### **WELCOME!**

We're so excited to begin our partnership with you! To ensure we have the information we need to best serve you, please take a few moments to fill out the form below. If you have any questions, please feel free to contact us. Thank you for the opportunity to do business with your company.

### **NEW ACCOUNT SETUP PROCEDURES**

- Copy and complete the New Customer Information Form.  
(Also available on web site)
- FAX the completed Form to 662-566-7657.
- MAIL or deliver your Form to :

Style-Line Furn., Inc.  
PO Box 2450  
Verona, MS 38879-2450  
662-566-1111

- Our standard credit terms are Net 30 for approved credit accounts.
- We assign approved invoices to CIT Commercial Services.

### **SUBMITTING YOUR FORM**

- If you have questions on how to complete the form, please call our Sales Department team for instructions 662-566-1113.
- Verify that your account is set up and approved. Failure to confirm may cause a delay in your order.
- Please verify all information is correct before submitting form.



F U R N I T U R E

116 Godfrey Road • P.O. Box 2450  
Verona, MS 38879-2450

# STYLE-LINE FURNITURE CUSTOMER INFORMATION FORM

## CUSTOMER INFORMATION

COMPANY NAME:			
CONTACT NAME:			
E-MAIL:		PHONE:	
MOBILE:		FAX:	

## CUSTOMER BILLING INFORMATION

COMPANY NAME:					
ADDRESS:					
CITY:		STATE:		ZIP CODE:	

## CUSTOMER SHIPPING INFORMATION

COMPANY NAME:					
ADDRESS:					
CITY:		STATE:		ZIP CODE:	

## CUSTOMER BUYER INFORMATION

CONTACT NAME:			
E-MAIL:		PHONE:	
MOBILE:		FAX:	

## CUSTOMER WAREHOUSE INFORMATION

CONTACT NAME:			
E-MAIL:		PHONE:	
MOBILE:		FAX:	

## CUSTOMER RECEIVING INFORMATION

CONTACT NAME:			
E-MAIL:		PHONE:	
MOBILE:		FAX:	

## CUSTOMER SERVICE INFORMATION

CONTACT NAME:			
E-MAIL:		PHONE:	
MOBILE:		FAX:	



FURNITURE

116 Godfrey Road • P.O. Box 2450  
Verona, MS 38879-2450

# STYLE-LINE FURNITURE CUSTOMER CREDIT APPLICATION AND AGREEMENT

## BUSINESS INFORMATION

LEGAL BUSINESS NAME:			
DOING BUSINESS AS (DBA):		YEARS IN BUSINESS:	
TYPE OF BUSINESS:	CORPORATION <input type="checkbox"/> L.L.C. <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> SOLE PROPRIETORSHIP <input type="checkbox"/>		
TAX ID #:		D&B (if known):	
OWNER/PRINCIPAL NAME:			
ACC. PAYABLE CONTACT NAME:			
ACC. PAYABLE PHONE:		A/P FAX:	A/P EMAIL:

## TRADE REFERENCES

1	COMPANY NAME:		
	ACCOUNT #:		
	CONTACT:		
	PHONE:		FAX:
2	COMPANY NAME:		
	ACCOUNT #:		
	CONTACT:		
	PHONE:		FAX:
	COMPANY NAME:		
	ACCOUNT #:		
	CONTACT:		
	PHONE:		FAX:

## BANK REFERENCE

BANK NAME:		OFFICER:	
BRANCH NAME:		PHONE:	
CHECKING ACCT. #:			
SAVINGS ACCT. #:			

## AGREEMENT

The undersigned represents that he or she is an officer or agent of applicant and is duly authorized to act on its behalf. If extended credit pursuant to this Credit Agreement, the applicant hereby agrees to the following terms: Payment is due in full 30 days from the date of invoice. In the event that account is not paid in full by the due date, applicant will inform Style-Line Furn, Inc. of the reason for nonpayment and will pay a late payment charge of 1.5% per month (18% annual) computed on the unpaid balance. The applicant agrees to pay all cost and reasonable attorney's fees incurred in connection with collection of any past due balances on this account. Any Homestead or other exemptions are hereby waived to the extent allowed by law. Style-Line Furn, Inc. is hereby authorized to investigate the references listed above concerning applicant's credit history and financial responsibility. This Credit Application and Agreement supersedes any prior agreement between the parties and may not only be modified in writing.

AUTHORIZED SIGNATURE:		DATE:	
PRINTED NAME & TITLE:			

Thanks you for filling out the form. Please verify all the information is correct before submitting the form. If you have any questions about the form or need to make corrections to the form you submitted, please contact mitzi@styleline.us or call 662-566-1113 x160. Once all information is verified, please click the submit button in the top right corner of the form. If you can't email the form, you can print it out and fax it to 662-566-7657.