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Carefree Luxury Service

CREDIT APPLICATION FOR CORPORATE ACCOUNTS

COMPANY NAME _____
ADDRESS _____ SUITE / FLOOR _____
CITY _____ STATE _____ ZIP CODE _____
TELEPHONE NUMBER _____ YEAR INCORPORATED _____
TYPE OF BUSINESS _____ YEARLY SALES _____
CHIEF EXECUTIVE OFFICER _____
TELEPHONE NUMBER _____ TITLE _____
HOW MANY EMPLOYEES ARE AT THIS LOCATION? _____
HOW MANY EMPLOYEES WILL UTILIZE OUR SERVICE? _____
CONTACT PERSON _____ TELEPHONE NUMBER _____
ACCOUNTS PAYABLE CONTACT NAME _____
TELEPHONE NUMBER _____
IF THERE IS A PARENT COMPANY PLEASE LIST ADDRESS BELOW:
ADDRESS _____ SUITE / FLOOR _____
CITY _____ STATE _____ ZIP _____
CONTACT PERSON _____ TELEPHONE NUMBER _____
BANK ACCOUNTS - CREDIT REFERENCES:
ACCOUNT NUMBER _____
BANK _____
(CORPORATE ACCOUNTS SHOW CORP. BANK)
BANK ADDRESS _____
CITY _____ STATE _____ ZIP CODE _____
ACCOUNT NUMBER _____
BANK _____
(CORPORATE ACCOUNTS SHOW CORP. BANK)
BANK ADDRESS _____
CITY _____ STATE _____ ZIP CODE _____