



NEW ACCOUNT APPLICATION

Name of Business: _____ Tel: _____

Name of Owner: _____ Fax: _____

A/P Supervisor: _____ Email: _____

Billing Address: _____ Website: _____

City: _____ State: _____ Zip Code: _____

Shipping Address: _____ Tel: _____

City: _____ State: _____ Zip Code: _____

Preferred Carrier: _____

Trade References: Please list at least three (3) current trade references. Include company name, contact person, address, telephone and fax numbers.

1) Company: _____ Tel: _____
Contact: _____ Fax: _____
Address: _____

2) Company: _____ Tel: _____
Contact: _____ Fax: _____
Address: _____

3) Company: _____ Tel: _____
Contact: _____ Fax: _____
Address: _____

Bank Reference: _____ Tel: _____
Contact: _____ Fax: _____
Address: _____

Applicant's signature attests financial responsibility, ability and willingness to pay our invoices in accordance with the following terms: NET 30 DAYS FROM DATE OF COPELAND FURNIUTRE INVOICE

The above information is for the purpose of obtaining credit and is warranted to be true I/we hereby authorize the firm to whom this application is made to investigate the references listed pertaining to my/our credit and financial responsibility.

Company Name: _____

Authorized Signature: _____ **Date:** _____

Title: _____