

# CREDIT APPLICATION

Date: \_\_\_\_\_

**Billing Information:** *Please call to advise if ship-to address differs from the billing address.*

Business Name:			
Mailing Address:			
City, State, Zip			
Business Phone #:	Contact (A/P):		
Business Fax #:	Primary E-mail:		
Are you in business:	Full Time (FT) / Part Time(PT)	Years in business:	

Requested Terms:  Net 30  Credit Card  COD

Invoices/Statements Via:  Fax  E-mail  Mail

**Bank Reference:** *Please complete the following, including the account number, complete address and phone number.*

Bank Name:		Account #:	
Mailing Address:			
City, State, Zip:			
Phone #:		Fax #:	

## **Trade References (Suppliers):**

Business Name:		Account #:	
Mailing Address:			
City, State, Zip:			
Phone #:		Fax #:	

Business Name:		Account #:	
Mailing Address:			
City, State, Zip:			
Phone #:		Fax #:	

By signing below, I authorize Greenhouse Fabrics to check my credit history through Credit Link, their credit reporting agency. I am aware that information gathered about me will be used to determine my eligibility for terms requested above. I do authorize my bank and trade references listed above to release and/or verify information. If my account is placed on NET 30 DAYS, I agree to remit the balance owed to Greenhouse Fabrics within 30 days of INVOICE date.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



866.755.5000 Toll Free • 866.766.6000 Fax • 336.887.2631 Local  
1106 Foust Ave. High Point, NC 27260  
GreenhouseDesign.net