

# Application for Credit



Stylmark Incorporated • 800-328-2495  
6536 Main Street NE • PO Box 32008  
Minneapolis, Minnesota 55432-0008  
Fax: 763-574-1052 (Finance Department)

Please photocopy this original and fax to Stylmark

Date \_\_\_\_\_ 20\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Billing Address \_\_\_\_\_ Fax \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Shipping Address \_\_\_\_\_ Fax \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business is a: Corp \_\_\_\_\_ Partnership \_\_\_\_\_ Individual D.B.A. \_\_\_\_\_

Social Security # if Partnership \_\_\_\_\_ Federal Tax I.D. # if Proprietorship \_\_\_\_\_ Corporation \_\_\_\_\_

Owner-Officers \_\_\_\_\_ President \_\_\_\_\_ V. President \_\_\_\_\_

Controller/Treasurer \_\_\_\_\_ Date Business Started \_\_\_\_\_

Credit Line Desired \_\_\_\_\_ Sales Tax Exemption \_\_\_\_\_  
(Please send financial statement) (Please send exemption certificate)

County if Taxable \_\_\_\_\_

Name and Title of person responsible for approval, processing and payment of invoice \_\_\_\_\_

## Credit references - Bank plus three trade references

Bank Name \_\_\_\_\_ Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Account Number \_\_\_\_\_ Phone Number \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Phone Number \_\_\_\_\_

Fax Number \_\_\_\_\_ Fax Number \_\_\_\_\_

I authorize STYLMARK, INC. to investigate my credit record and report to proper persons or bureaus.

TERMS: 1% 15 Days, Net 30 (Prompt payment discount on materials only) or Net 30

I understand that if my account is not kept current, my credit privileges may be immediately canceled by STYLMARK, INC. I agree to pay interest at the rate of 1.5% per month (or if such rate is illegal or usurious, at the maximum rate permitted by law) from the due date of the invoice plus any collection charges, including attorney fees, to the extent permitted by law.

STYLMARK, INC'S acceptance of this application for credit is subject to the terms and conditions stated above.

Signed \_\_\_\_\_

Must be signature of authorized officer

Title \_\_\_\_\_