

# Prestige Entries

25 Highland Park Village, #100-526 · DALLAS, TEXAS 75205 · PHONE 985-340-0902 · FAX 214-526-3367

## APPLICATION FOR CREDIT ACCOUNT

**Terms: Net 15 days from date of invoice (unless specified otherwise on invoice).  
Service charge applied on all overdue accounts.**

You must fill out all requested information on this form in order for us to properly process your request for an open account. It is especially important to fully complete the bank information. Banks require a signed copy of this application, including your current account number, prior to releasing any information pertaining to your credit status. Thank you for your co-operation.

### Company Information

Today's Date: \_\_\_\_\_

Business Name (DBA): \_\_\_\_\_

Actual Corporate Name (if different): \_\_\_\_\_

Receiving Address: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Telephone Numbers: Business \_\_\_\_\_ Fax \_\_\_\_\_

Company Information: Corporation  C Corp  State of Incorporation \_\_\_\_\_ Partnership/LLP  LLC  Sole Proprietorship

Federal ID # \_\_\_\_\_ If Sole Proprietor, SS# \_\_\_\_\_ DUNS# \_\_\_\_\_

Date Incorporated \_\_\_\_\_ Number of Years in Business \_\_\_\_\_

Ownership Information: Name(s) of Owner(s), Partner(s), President or Treasurer (list full name, home address and social security number)

Name	Position	Address	SS#
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

Accounts Payable Contact/Email: \_\_\_\_\_

Sales Tax Permit # (please attach copy) \_\_\_\_\_ Amount of Credit Requested \$ \_\_\_\_\_ monthly

### Financial Information

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

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Your current account #: \_\_\_\_\_ Account Manager: \_\_\_\_\_

#### Trade References (Please list only companies with whom you have established credit.)

1. Trade reference: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip code: \_\_\_\_\_ Phone #: \_\_\_\_\_ Contact Name \_\_\_\_\_

2. Trade reference: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip code: \_\_\_\_\_ Phone #: \_\_\_\_\_ Contact Name \_\_\_\_\_

3. Trade reference: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip code: \_\_\_\_\_ Phone #: \_\_\_\_\_ Contact Name \_\_\_\_\_

I understand and hereby apply for credit for the payment of goods purchased by my company and authorize Prestige Entries to investigate my credit record and to verify my credit references as provided above. I am fully authorized to grant you consent to make such an investigation. If such credit is granted, I agree to pay all invoices within terms and agree to pay interest penalties of 1 ½% per month (18% per annum) which will be applied to overdue balances. The above information is hereby certified to be correct.

Signed: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Signed: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_