

**SIGNATURE HOSPITALITY CARPETS**

**COMPANY** \_\_\_\_\_

**DBA** \_\_\_\_\_

**YEARS IN BUSINESS** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**PHONE** \_\_\_\_\_

**FAX** \_\_\_\_\_

**CITY** \_\_\_\_\_

**STATE** \_\_\_\_\_

**CORPORATION** \_\_\_\_\_ **PARTNERSHIP** \_\_\_\_\_ **PROPRIETORSHIP** \_\_\_\_\_ **PRINCIPAL** \_\_\_\_\_

**DO YOU RELEASE A FINANCIAL STATEMENT?** \_\_\_\_\_

**IF YES, PLEASE ATTACH A STATEMENT IF POSSIBLE**

**LISTED WITH D&B? IF SO, DUNS NUMBER** \_\_\_\_\_

**CREDIT APPLICATION FOR**

**BANK REFERENCE(1)**

**NAME** \_\_\_\_\_

**STREET** \_\_\_\_\_

**CITY** \_\_\_\_\_

**STATE** \_\_\_\_\_

**ZIP CODE** \_\_\_\_\_

**ACCT.NO.** \_\_\_\_\_

**ACCT OFFICER** \_\_\_\_\_

**PHONE #** \_\_\_\_\_

**BANK REFERENCE(2)**

**NAME** \_\_\_\_\_

**STREET** \_\_\_\_\_

**CITY** \_\_\_\_\_

**STATE** \_\_\_\_\_

**ZIP CODE** \_\_\_\_\_

**ACCT. NO.** \_\_\_\_\_

**ACCT. OFFICER** \_\_\_\_\_

**PHONE #** \_\_\_\_\_

**TRADE REFERENCE(1)**

**NAME** \_\_\_\_\_

**STREET** \_\_\_\_\_

**CITY** \_\_\_\_\_

**STATE** \_\_\_\_\_

**ZIP CODE** \_\_\_\_\_

**ACCOUNT #** \_\_\_\_\_

**PHONE #** \_\_\_\_\_

**TRADE REFERENCE(2)**

**NAME** \_\_\_\_\_

**STREET** \_\_\_\_\_

**CITY** \_\_\_\_\_

**STATE** \_\_\_\_\_

**ZIP CODE** \_\_\_\_\_

**ACCOUNT#** \_\_\_\_\_

**PHONE #** \_\_\_\_\_

**TRADE REFERENCE(3)**

**NAME** \_\_\_\_\_

**STREET** \_\_\_\_\_

**CITY** \_\_\_\_\_

**STATE** \_\_\_\_\_

**ZIP CODE** \_\_\_\_\_

**ACCOUNT#** \_\_\_\_\_

**PHONE #** \_\_\_\_\_

**TRADE REFERENCE(4)**

**NAME** \_\_\_\_\_

**STREET** \_\_\_\_\_

**CITY** \_\_\_\_\_

**STATE** \_\_\_\_\_

**ZIP CODE** \_\_\_\_\_

**ACCOUNT#** \_\_\_\_\_

**PHONE #** \_\_\_\_\_

**I HEREBY AUTHORIZE THE ABOVE BANK(S) AND TRADE REFERENCE(S) TO RELEASE PERTINENT INFORMATION TO SIGNATURE HOSPITALITY CARPETS**

**SIGNATURE** \_\_\_\_\_ **TITLE** \_\_\_\_\_

**PRICE CODE** \_\_\_\_\_

**RETURN TO: LORA SHOEMAKER 2222 S. HAMILTON ST., DALTON, GA. 30722  
(706) 270-5799 OR (800)809-7086 FAX (706)270-8779**