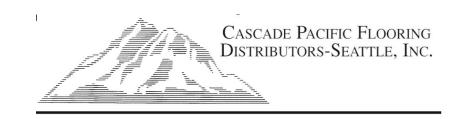
Kent Branch 253-395-0584 seattle@cpfloors.com



Portland Branch
portland@cpfloors.com
Eugene Branch
eugene@cpfloors.com

Commercial Credit Account Application and Account Agreement

The undersigned hereby applies for open account credit with the Cascade Pacific Flooring Distributors-Seattle, Inc.

The undersigned certifies that the following information is true and correct as of the date of this application. If credit is granted the undersigned agrees to all of the provisions of the Terms and Conditions, which is a part of this agreement

Date:				
Account Party:				
Billing Address:				
Street		City		State Zip
Phone Number:			Fax:	
Cell Phone:			Email:	: <u></u>
Date Business Started:		Type	of Business:	
Organization: Individual	Partnership	Corporation	LLC	
1st Name of Principal		<u>Date of Birth</u>		Social Security Number
Residence Address		City	<u>State</u>	Zip
Ond Name of Driveing		Date of Divide		Cooled Cooverity Number
2nd Name of Principal		Date of Birth		Social Security Number
Residence Address		City	<u>State</u>	<u>Zip</u>
Surety/Bonding Company:			Bond Am	
Do you pay tax at the source:			'esNo (If	no, attach Reseller Permit)
Do you require a purchase order num Authorized Purchasers:	nber or side mark on your o		'esNo	
	Bank Inf	<u>ormation</u>		
Name of Bank:				
Address:				
Street		City		State Zip
		Account Nu		
Phone Number:		_	Fax:	
	Trade Re	eferences		
Name:				
Address:				
Phone Number:	Account Num	iber:	Fax:	State Zip
Name:				
Address:				
Phone Number:	Account Num	City lber:	Fax:	State Zip
Name:				
Address:				
Street		City		State Zip
Phone Number:	Account Num	nber:	Fax:	