

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



**CASCADE PACIFIC FLOORING
DISTRIBUTORS-SEATTLE, INC.**

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: _____
Date Business Started: _____ Type of Business: _____
Organization: Individual Partnership Corporation LLC

1st Name of Principal Date of Birth Social Security Number

Residence Address City State Zip

2nd Name of Principal Date of Birth Social Security Number

Residence Address City State Zip

Contractor Registration No.: _____
Surety/Bonding Company: _____ Bond Amount: _____
Do you pay tax at the source: Yes No (If no, attach Reseller Permit)
Do you require a purchase order number or side mark on your order: Yes No
Authorized Purchasers: _____

Bank Information

Name of Bank: _____
Address: _____
Street City State Zip
Individual to Contact: _____ Account Number: _____
Phone Number: _____ Fax: _____

Trade References

Name: _____
Address: _____
Street City State Zip
Phone Number: _____ Account Number: _____ Fax: _____

Name: _____
Address: _____
Street City State Zip
Phone Number: _____ Account Number: _____ Fax: _____

Name: _____
Address: _____
Street City State Zip
Phone Number: _____ Account Number: _____ Fax: _____