



www.clgco.com

Carroll Companies, Inc.

1640 Old 421 South

Boone, NC 28607

Phone: 828-264-2521 1-800-884-2521

Fax 828-264-2633

Credit Application/Agreement

We(or I) with this application apply for credit with Carroll Companies, Inc. and hereby submit the following statements knowing them to be correct. We also understand that this information will be kept confidential.

A. APPLICANT

Legal Business Name: _____
(List all Trade Names, DBA's; Divisions or Subsidiaries)

Street Address: _____ City: _____ State: _____ Zip: _____

Mailing Address: _____ City _____ State: _____ Zip: _____

Phone: _____ Fax: _____ E-Mail: _____

Ship to Address: _____

Estimated Annual Sales: _____ Person to contact about Account: _____

Amount of Credit Requested: \$ _____ Type of Business _____ How Long in Business _____

B. BUSINESS INFORMATION

Sole Proprietorship Owner _____ Partnership Partner(s) _____

Corporation/LLC President/Member/Manager _____

Federal Tax No. (if applicable) _____ Sales Tax Exemption Certificate Yes No (if yes, enclose signed certificate or copy)

Mortgageholder/Landlord _____ Address _____ Phone# _____

C. BANKING INFORMATION

Bank _____ Branch _____ Phone _____

Address _____ City _____ State _____ Zip _____

Officer Contact _____ Acct. No. _____ Type of Acct. _____

I, _____ of _____
Owner, Partner, Officer, or Member/Manager (Company Name)
give the bank named above authorization to release my credit history to Carroll Companies, Inc..

(Signature) (Date)

D. TRADE REFERENCES (Please fill out 3 references)

	<u>Name</u>	<u>Contact</u>	<u>Street Address(City, State, Zip)</u>	<u>Phone#</u>	<u>Fax#</u>
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____