AMORIM

Amorim Cork America

Credit Application

COMPANY NAME : _____

Mailing Address:

Shipping Address *(if different from mailing address)*

Phone:

Fax:

Bank References :

Contact:

( )

Account Numbers :

General -

Payroll -

We hereby authorize release of information:

Authorized signature: _____

Trade References :

( )

( )

( )

( )

Tax Identification :

Federal

State

Resale *

* Please attach completed resale certificate

Landlord :

( )

Authorized by: _____

Approved: _____

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E-mail: info@amorimcorkamerica.com