

# Customer Profile For Customer Accounts

Business Name: \_\_\_\_\_

Type Of Business: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street/P.O. Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Shipping Address: \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Federal Tax Id \_\_\_\_\_ How Long In Business? \_\_\_\_\_

Other Business Experience \_\_\_\_\_

Form Of Organization: Corporation Partnership Proprietorship \_\_\_\_\_ Other \_\_\_\_\_

(Circle One)

Officers/Owners: \_\_\_\_\_ Name \_\_\_\_\_ Name \_\_\_\_\_

\_\_\_\_\_ Title \_\_\_\_\_ Title \_\_\_\_\_

\_\_\_\_\_ Social Security Number \_\_\_\_\_ Social Security Number \_\_\_\_\_

Accounts Payable Contact: \_\_\_\_\_ Requested Credit \_\_\_\_\_

Persons Authorized To Accept: \_\_\_\_\_

And/Or Purchase Merchandise: \_\_\_\_\_

(By Name Or Position) \_\_\_\_\_

## Bank References

\_\_\_\_\_ Name Of Bank \_\_\_\_\_ Loan Officer \_\_\_\_\_

\_\_\_\_\_ Address \_\_\_\_\_ Account Number \_\_\_\_\_

\_\_\_\_\_ City/State/Zip \_\_\_\_\_ Telephone/Fax No. \_\_\_\_\_

## Trade Credit

References:

*4 Are Required*

\_\_\_\_\_ Name \_\_\_\_\_ Name \_\_\_\_\_

\_\_\_\_\_ Mailing Address \_\_\_\_\_ Mailing Address \_\_\_\_\_

\_\_\_\_\_ City/State/Zip \_\_\_\_\_ City/State/Zip \_\_\_\_\_

\_\_\_\_\_ Contact \_\_\_\_\_ Contact \_\_\_\_\_

\_\_\_\_\_ Telephone/Fax No. \_\_\_\_\_ Telephone/Fax No. \_\_\_\_\_

\_\_\_\_\_ Name \_\_\_\_\_ Name \_\_\_\_\_

\_\_\_\_\_ Mailing Address \_\_\_\_\_ Mailing Address \_\_\_\_\_

\_\_\_\_\_ City/State/Zip \_\_\_\_\_ City/State/Zip \_\_\_\_\_

\_\_\_\_\_ Contact \_\_\_\_\_ Contact \_\_\_\_\_

\_\_\_\_\_ Telephone/Fax No. \_\_\_\_\_ Telephone/Fax No. \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Please Complete All Required Information. Incomplete Applications Will Result In A Delay In ProCessing.  
Until Credit Is Approved, All Orders Are Cod.



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