

ACCOUNT APPLICATION



Arcadia Publishing

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FOR CREDIT DEPT. USE ONLY

Acct. # _____

Date Opened _____

Credit Limit _____

SECTION 1—BUSINESS/BILLING INFORMATION

REGISTERED COMPANY NAME _____

TRADING COMPANY NAME (if different) _____

OWNER(S) NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE # _____ FAX # _____

EMAIL _____

WHAT TYPE OF BUSINESS IS THIS? _____

RESALE LICENSE # _____ FEDERAL I.D. # _____

OWNERSHIP

- | | |
|---|---------------------------------------|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Nonprofit |
| <input type="checkbox"/> Partnership | <input type="checkbox"/> Gov't Agency |
| <input type="checkbox"/> Proprietorship | <input type="checkbox"/> Institution |

WHEN DID THIS BUSINESS BEGIN?

SHIPPING INFORMATION

Check here if same as above information

ADDRESS _____

CITY _____ STATE _____ ZIP _____

CONTACT INFORMATION

CONTACT NAME _____

PHONE # _____ FAX # _____

EMAIL _____

Please note that all our goods supplied are subject to a Reservation of Title clause, and that interest is chargeable on overdue accounts.

I confirm that I have read and agree to be bound by Arcadia Publishing's terms of trading.

SIGNED _____

POSITION/TITLE _____ DATE _____

APPLICATION FOR CREDIT



A R C A D I A
P U B L I S H I N G

SECTION 2—BANK INFORMATION/REFERENCES

The more exact the names and numbers,
the faster we get a response. Thank you.

• **FILL THIS OUT ONLY IF YOU ARE APPLYING FOR A LINE OF CREDIT.**

• This information is given for the purpose of obtaining credit and is warranted to be true. I/We authorize Arcadia Publishing to investigate the references listed pertaining to my/our credit and financial responsibilities.

DUN AND BRADSTREET NUMBER _____

BANK NAME _____ ACCOUNT # _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE # _____ FAX # _____

SUPPLIER _____ ACCOUNT # _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE # _____ FAX # _____

SUPPLIER _____ ACCOUNT # _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE # _____ FAX # _____

SUPPLIER _____ ACCOUNT # _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE # _____ FAX # _____

Please note that all our goods supplied are subject to a Reservation of Title clause, and that interest is chargeable on overdue accounts.

I confirm that in consideration of you having agreed to supply goods to the above named applicant, I hereby guarantee payment of any account due and agree to be bound by the terms of trading.

SIGNED _____

POSITION/TITLE _____ DATE _____