



## Credit Application

The following information is submitted in order that we may establish an open account and credit limit for your company. By completing this form, you give Modus Furniture International the right to contact you by mail, email, phone or fax for business and marketing purposes. All information in this application is private and will not be shared with any third parties.

You may fax or email your completed application to (310) 827-7972 or dsord@modusfurniture.com.

<b>Contact Name</b>			
Contact Name			
<b>Company Name</b>			
Company Name			
<b>Address</b>			
Address			
City		State & Zip Code	
Phone		Fax	
E-mail		Highest Credit Desired	
<b>General Company Information</b>			
Legal Structure (check one)			
<input type="checkbox"/> Corporation		<input type="checkbox"/> Partnership	
<input type="checkbox"/> Proprietorship			
In Business Since		Business Type	
Federal Tax Id #		State Resale #	
<b>Officers or Owners and Positions With Company</b>			
Name		Position	
Name		Position	
<b>Bank References</b>			
Bank Name			
Address			
Phone		Checking Account#	
<b>Trade References</b>			
Company	Contact	Phone	Fax
1.			
2.			
3.			
4.			
5.			
<b>Signature</b>			
Signature			Date