



# Credit Application

Business Contact Information			
Company Name:			
Name and Title of Person Completing Form:			
Phone:	Fax:	E-Mail:	
Company Billing Address:			
City:		State:	Zip Code:
Date Business Commenced:			
Business and Credit Information			
Primary Business Address:			
City:		State:	Zip Code:
How long at current address?			
Telephone:	Fax:	Email:	
Bank Name:			
Bank Address:		Phone:	
City:		State:	Zip Code:
Type of Account:	Account number:		
Savings			
Checking			
Other			
Business/Trade References			
Company Name:		Company Contact Name:	
Address:			
City:		State:	Zip Code:
Phone:	Fax:	E-mail:	
Type of Account:			
Company Name:		Company Contact Name:	
Address:			
City:		State:	Zip Code:
Phone:	Fax:	E-mail:	
Type of Account:			
Company Name:		Company Contact Name:	
Address:			
City:		State:	Zip Code:
Phone:	Fax:	E-mail:	
Type of Account:			
Agreement			
<ol style="list-style-type: none"> <li>1. All invoices are to be paid 30 days from the date of invoice.</li> <li>2. Finance charges 1.5% per month, or 18% per year will be added to all past due accounts.</li> <li>3. By submitting this application, you authorize TAJ Flooring, Inc. to make inquiries of the banking and business/trade references that you have provided.</li> </ol>			
Signatures			
Signature:		Signature:	
Title:		Title:	
Date:		Date:	

TAJ Flooring, Inc.  
740 Church Road  
Elgin, IL 60123

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