



**CREATIVE WOOD PRODUCTS**  
**NEW ACCOUNT APPLICATION**

Date \_\_\_\_\_

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

Billing Address \_\_\_\_\_

Phone No. ( ) \_\_\_\_\_ Fax No. ( ) \_\_\_\_\_

Nature of Business \_\_\_\_\_ Year Established \_\_\_\_\_

**President/Owner:** \_\_\_\_\_

**California Seller's Permit No.** \_\_\_\_\_ (attach copy of Resale Cert.)

Corporation  Partnership  Sole Proprietorship Date Incorporated: \_\_\_\_\_ State \_\_\_\_\_

If a subsidiary, list parent company \_\_\_\_\_

**Accounting:**

A/P Manager: \_\_\_\_\_ Phone: \_\_\_\_\_ email \_\_\_\_\_

**TRADE REFERENCES**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone No. ( ) \_\_\_\_\_  
Fax No. ( ) \_\_\_\_\_

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone No. ( ) \_\_\_\_\_  
Fax No. ( ) \_\_\_\_\_

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone No. ( ) \_\_\_\_\_  
Fax No. ( ) \_\_\_\_\_

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone No. ( ) \_\_\_\_\_  
Fax No. ( ) \_\_\_\_\_

**BANK REFERENCE**

Bank Name \_\_\_\_\_ Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone No. ( ) \_\_\_\_\_ Fax No. ( ) \_\_\_\_\_ Type of Account \_\_\_\_\_  
Account No. \_\_\_\_\_ Contact Name: \_\_\_\_\_

By signing below, you authorize Creative Wood to obtain appropriate credit information regarding your account(s) with the above mentioned trade/bank references.

\_\_\_\_\_  
Signature Print Name Title