

COMPANY STATEMENT

BUSINESS NAME

ADDRESS

PHONE NUMBER

YEARS IN BUSINESS

PREVIOUS ADDRESS

YEARS HERE

ADDRESS WHERE FURNITURE IS TO BE DELIVERED

NAME OF APARTMENT COMPLEX

PHONE NUMBER

NAME OF PERSON USING FURNITURE

OWNERSHIP: SOLE PROPRIETOR PARTNERSHIP CORPORATION

SSN (SOLE PROPRIETOR)

TIN (PARTNERSHIP/CORP)

NAME OF PRINCIPLES

TITLE

HOME ADDRESS

PRIMARY BANK

ACCOUNT NUMBER

NAME OF BANK OFFICER

PHONE NUMBER

OTHER BANKS DEALT WITH

NAME

ADDRESS

CREDIT REFERENCES

NAME

ADDRESS

WHO REFERRED YOU TO US?

AUTHORIZED SIGNATURE

DATE

THANK YOU FOR YOUR BUSINESS