



1501 Martin Luther King Jr Way  
 Oakland, CA 94612  
 1.510.867.2324

## CREDIT APPLICATION

### BUSINESS INFORMATION

Business Name		Date business started:
Street		Check one: <input type="checkbox"/> Corporation <input type="checkbox"/> Sole proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Public School <input type="checkbox"/> Government (Local, State, Fed) <input type="checkbox"/> 501c3 <input type="checkbox"/> Other
City, State, ZIP Code		
Phone   Fax		
E-mail		
Business Website		
Accounts Payable Contact		
Federal ID / Soc. Sec. #:		
Resale # (if applicable)		
Purchase Order required?	<input type="checkbox"/> yes <input type="checkbox"/> no	Estimated monthly purchases from FLAX: \$
Personnel Authorized to Charge:		

### BANK INFORMATION

Bank Name:	Account #:
Street	
City, State, ZIP Code	
Phone   Fax	

### BUSINESS/TRADE REFERENCES

Business Name	Phone	
Street	Fax	
City, State, ZIP Code	Account #	
Business Name	Phone	
Street	Fax	
City, State, ZIP Code	Account #	
Business Name	Phone	
Street	Fax	
City, State, ZIP Code	Account #	

### AGREEMENT

1. Terms are Net 30 Days from the Invoice Date.
2. Claims or disputes with shipments must be made within seven business days of receipt.
3. The undersigned authorizes FLAX art & design to obtain credit information from the supplied banking and business/trade references.

Signature	Title	
Name (printed)	Date	

**Please print, complete and return via fax to 1-415-552-8172, or scan and email to [cs@flaxart.com](mailto:cs@flaxart.com)**

<b>INTERNAL USE</b>	Approved by:	Credit Limit: \$
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