

Artistic Finishes, Inc.
2224 Terminal Road
St. Paul, MN 55113 USA
Phone: 651-631-2807
Fax: 651-631-1805
Email: AR@artisticfinishes.com

CUSTOMER PROFILE



Company Information:

Full Legal Business or Individual Name _____

Doing Business As _____

Billing Address _____

City/State or Province/Zip or Postal Code _____

Shipping Address _____

City/State or Prov/County/Zip or Postal Code _____

Tel: () _____ Fax: () _____

Email Address _____

Federal ID No. _____ Tax Exempt No. – Send Copy of Form _____

How long in business? _____

Current Ownership in Place Since _____

Accounts Payable Contact: _____

Check one: Individual Partnership Corporation

Estimated: \$ _____ \$ _____ \$ _____

Sales Receivables Desired Credit

Flooring Manufacturer Lines Carried? _____

We warrant the information provided to be true. I, an authorized officer, grant permission to investigate the references and commercial credit checks. I agree to pay Artistic Finishes, Inc. within stated terms of sale and/or Net 30 days. A service charge of 18% percent per year could be imposed upon the accrued, unpaid balance of any bill not paid within 30 days. If the account is placed with a collection agency or an attorney, whether a lawsuit is filed or otherwise, or if services of an attorney are required to protect our interest, we agree to pay all collection costs, reasonable attorney's fees, interest, and any costs associated with placing your obligation with a collection agency or attorney. In addition, we agree to pay all charges on all returned checks on our account. We understand the return check charge is \$40.00 per check. We also understand and agree that all litigation will be in the State of Minnesota, Ramsey County.

Signature _____ Date _____

Print Name _____ Title _____

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age. The federal agency that administers compliance with this law is the Federal Trade Commission.

Approved By	Credit Line	Terms	Sales Rep
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Business References:

REFERENCE #1: _____
Complete Name

Complete Address _____

Contact Name/Account Number _____

() _____
Telephone Number

() _____
Fax Number

REFERENCE #2: _____
Complete Name

Complete Address _____

Contact Name/Account Number _____

() _____
Telephone Number

() _____
Fax Number

REFERENCE #3: _____
Complete Name

Complete Address _____

Contact Name/Account Number _____

() _____
Telephone Number

() _____
Fax Number

Bank Reference

Financial Institution _____

Complete Address _____

Contact Name/Account Number _____

() _____
Telephone Number

() _____
Fax Number