



NEW ACCOUNT FORM

Date _____

Business Name _____ Bus. Phone _____

Address _____

Owner's Name _____ Home or Cellphone _____

Owner's Home Address _____

City _____ State _____ Zip _____

E-mail Address _____

Type of Business _____ Year Established _____

State Sales Tax Number _____ (please attach copy of your actual form)

Bank _____ Address _____

APPLYING FOR CREDIT

References if applying for open account - (Suppliers, Other Commercial References)
Please use suppliers you currently have NET 30 accounts with and recent credit history.

1. _____ Acct # _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

2. _____ Acct # _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

3. _____ Acct # _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

RETURN THIS FORM TO:

South Star Moulding & Supply
413 Harding Industrial Drive
Nashville, TN 37211
Fax: 615-333-0168
Attn: Credit Dept.