

Account Application

Company Information

Company Name _____

Full Legal Name (if different from above) _____

Contact Name _____

Phone _____

Fax _____

Email _____

Parent Company (if any) _____

Account Payable Contact Name _____

Phone _____

Fax _____

Email _____

Company Web Site _____

Bill-To Address _____

City _____

State/Province _____

ZIP/Postal Code _____

Country _____

Ship-To Address _____

City _____

State/Province _____

ZIP/Postal Code _____

Country _____

Form of Business:

Individual or Sole Proprietor

Corporation

Partnership

Other _____

Number of years in business _____

Type of book business _____

Number of staff (including part-time) _____

Primary categories of books carried _____

Dun & Bradstreet # (if any) _____

State/Province of Incorporation _____

Is Company publicly traded? Yes No

Canadian businesses *only*: Please provide the following identification number(s) if applicable.

BN _____

BIN _____

SIN (of sole proprietor) _____

Bank References

Bank Name _____

Account Number _____

Contact Name _____

Phone _____

Fax _____

Email _____

Bank Address _____

City _____

State/Province _____

ZIP/Postal Code _____

Country _____



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Trade References

Please list trade references preferably within the book industry. Do not list utility or credit card companies.

Trade Ref. #1 _____
Account Number _____
Contact Name _____
Phone _____
Fax _____
Email _____
Credit extended since _____

Address _____

City _____
State/Province _____
ZIP/Postal Code _____
Country _____

Trade Ref. #2 _____
Account Number _____
Contact Name _____
Phone _____
Fax _____
Email _____
Credit extended since _____

Address _____

City _____
State/Province _____
ZIP/Postal Code _____
Country _____

Authorization to Check Credit

The undersigned individual, who is either a *principle* or a *sole proprietor* of the applicant company, hereby grants permission to Paper Spider to obtain credit information from all listed references. Paper Spider agrees to keep all credit information confidential.

Signature of Applicant Officer

Printed Name of Applicant Officer

Title _____

Date _____

