

# Graphic Developments, Inc.

70 Mayflower Drive, West Hanover, MA 02339

Tel: 781-878-2222 Fax: 781-878-3400

## NEW ACCOUNT INFORMATION

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_ Fax: \_\_\_\_\_

TYPE OF BUSINESS Corporation: \_\_\_\_\_ Proprietorship: \_\_\_\_\_ Partnership: \_\_\_\_\_

Federal Tax #: \_\_\_\_\_ Number of years in business: \_\_\_\_\_

### OWNER OR OTHER PERSON RESPONSIBLE FOR PAYMENT

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_ S.S. #: \_\_\_\_\_

\_\_\_\_\_ D.O.B.: \_\_\_\_/\_\_\_\_/\_\_\_\_

### REFERENCES

#### BANK REFERENCE

Name of Bank: \_\_\_\_\_ Acct.#: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

#### TRADE OR BUSINESS REFERENCE

1. Name: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

3. Name: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

We certify that all information on this form is correct. We also give full authorization to Graphic Developments, Inc. to obtain confidential information concerning the credit standing of our company. This may include any or all of the credit reports available through credit report bureaus and distributors. When adequate commercial information to grant credit to the applicant is not available, I understand that a consumer report may be pulled on the principals of the business to establish a basis for granting credit. We agree to reimburse you for all collection and legal costs in the event of our default in amounts owed to Graphic Developments, Inc. This application is for business purposes, and not for personal, household or family purposes.

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_