



**CODE TO:
0186 / 8579**

Credit Application

Date: _____ Account # (For Office Use Only): _____

Trade Name

Legal Name

Street

City State Zip Code

Telephone Fax

E-Mail Address @ .

Terms Of Sale

Kravet Inc.
 Account Terms Desired N-30 COD Proforma Interim terms until review is completed COD Proforma
 Monthly credit line extension requested \$ _____ P O required Yes No
 Kravet Furniture, Inc. Standard terms: 50% deposit to order, balance before shipment. Written purchase order required for all orders

Key Business Information

Please give name, home address and telephone number of owner or an authorized officer if incorporated.

Name _____ Telephone _____
 Home Address _____ City _____ State _____ Zip _____
 Proprietorship Social Security # _____ Partnership Corporation Fed. I.D.# _____
 DATE BUSINESS ESTABLISHED Resale Tax No. _____ D & B Rating _____

Type of Business (Please refer to Code # below) Code No _____

01 Interior Designer W/Shop	06 Upholsterer	11 Piece Goods/Retail	18 Architect
02 Interior Designer (Home)	07 Carpet/Floorcovering Studio	12 Contract Specifier	19 Custom Furniture Maker
03 Dept. Store, Design Dept.	08 Furniture Store	13 Contract Purchaser	*99 Other _____
04 Dept. Store, Other	09 Upholstery Furniture Mfg.	15 Hospitality Purchaser	* If your Primary business is not listed, please use Code 99.
05 Drapery Workroom	10 Wallpaper Studio	16 Office Furniture Dealer	

References

Trade: Please list 3 active sources. References submitted without account numbers will not be considered.

Name _____ Street _____ City _____ State _____ Zip _____ Acct No _____
 Name _____ Street _____ City _____ State _____ Zip _____ Acct No _____
 Name _____ Street _____ City _____ State _____ Zip _____ Acct No _____

Bank: Please note our charge for returned checks is \$15.00.

Name _____ Street _____ City _____ State _____ Zip _____
 Phone No. _____ Officer _____ Account No. _____

Credit Information Release Authorization

It is understood and agreed that, Kravet Inc. and/or Kravet Furniture, Inc. may contact any of the above references, as well as business and consumer reporting agencies for the purpose of establishing credit terms or updating the customer's credit file.

Authorized Signature _____ Title _____ Date _____