

CREDIT APPLICATION



please complete entire form

COMPANY NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ FAX _____

PERSON COMPLETING FORM (*Print Clearly*) _____

SIGNATURE _____ DATE ____/____/____

By signing, I agree that I have read and understand the Red Rock Tileworks Terms and Conditions.

THREE CREDIT REFERENCES

NAME (BANK) _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ FAX _____

CONTACT (*Print Clearly*) _____

NAME (SUPPLIER) _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ FAX _____

CONTACT (*Print Clearly*) _____

NAME (SUPPLIER) _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ FAX _____

CONTACT (*Print Clearly*) _____