Print Form

DALLAS DOOR & SUPPLY CO.

9009 Chancellor Row, Dallas, TX 75247-5343
(214) 630-9783 · Fax (214) 630-2118
www.DallasDoor.com

Date: _____

DD&S SLMN: _____

CREDIT APPLICATION

Name: _____ Phone: _____ Fax: _____

Mailing Address: _____ City: _____ State: ____ Zip: _____

Street Address: _____ City: _____ State: ____ Zip: _____

Accounts Payable Contact: _____ Estimated Monthly Purchase: _____

Check One: Proprietorship: ____ Partnership: ____ Corporation-State Incorporated: _____

Subsidiary: _____ Yes _____ No If yes, give parent corp. _____

Type of Business: _____ How long in business? _____

Bank: _____ Officer: _____

Current supplier of doors, frames & hardware: _____

Trade References:

1. _____
Name Full Address Phone Fax

2. _____
Name Full Address Phone Fax

3. _____
Name Full Address Phone Fax

4. _____
Name Full Address Phone Fax

It is agreed that interest will be charged & paid from maturity on all obligations at the maximum rate allowed by law.

OUR TERMS ARE 2% 10 Days, net 30 days. We must receive originals by mail before we open account.

_____ _____

Print or Type Signature and Title Signature

Do you wish to receive a monthly statement? _____ Yes _____ No

CREDIT DEPARTMENT USE ONLY

ACCT. TYPE: _____ CREDIT LIMIT: _____ APPROVED BY: _____