

APPLICATION FOR CREDIT

Coastal Carolina Supply, Inc., PO Box 1259 Morehead City, NC 28557
Pool 252-726-8464 Pool Fax 252-726-3749
Toll Free 800-849-8464

Billing Information:

Legal Business Name	Phone #
Doing Business As (D/B/A)	Fax#
Billing Address	A/P Contact Person
City, State Zip	A/P Email
Ship To Address (if different from above)	A/P Phone and Fax

*******Tax Exempt:** No _____ If Yes _____ (attach COMPLETED exemption certificate)*****

*******Federal Identification number:** _____*****

SUPPLY (3) TRADE REFERENCES

Do not use Utility / Creditcard Companies, or Financial Institutions. Must be companies that you already have established monthly credit terms with.

(1) Company Name	Telephone
Address	Fax or e-mail (required)
(2) Company Name	Telephone
Address	Fax or e-mail (required)
(3) Company Name	Telephone
Address	Fax or e-mail (required)

Applicant Signature/Title

Date