



Approved _____
Credit Limit _____
Letter Sent _____
Computer Changed _____

Fabric Supply Incorporated

3434 2nd Street North
 Minneapolis, MN 55412
 Phone: (612) 588-0715
 Fax: (612) 588-2706

Customer Number		
Date		
Company Name		
Street Address		
City	State	Zip Code
Telephone Number (no dashes or spaces)		Fax Number
Tax Number (if applicable)		Form on File? <input type="checkbox"/> yes <input type="checkbox"/> no
Type of Business: <input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation		
Credit Line Requested		Years in Business
Principal Owner		Owner's Address
Partner (if applicable)		Partner's Address
Bank Reference	Account Number	Phone Number Fax Number
Trade Reference	Account Number	Phone Number Fax Number
Trade Reference	Account Number	Phone Number Fax Number
Trade Reference	Account Number	Phone Number Fax Number

The undersigned certifies that the above information is accurate. I give the above references permission to give my credit status and information to Fabric Supply Incorporated.

X _____ X _____
 Signature/Title Partner's Signature/Title