



AtlasBooks® Distribution

30 Amberwood Pkwy, P.O. Box 388, Ashland, OH 44805
Sales: 800-537-6727 Int'l: 419-281-5100 Fax: 419-281-0200

CREDIT APPLICATION (Please fax application to 1-419-281-6883)

Account Name _____ Parent Co. (if subsidiary) _____

Street Address of Business _____ City/State _____

At Present Location Since _____ Type of Business Wholesale Retail Other _____

In Business Since _____ Sole Ownership Partnership LLC Incorporated in _____ (STATE)

Name of Owner (Principal) _____ Home Address _____

Home Phone () _____ Reseller I.D. Number _____ DUNS Number _____

Federal I.D. Number _____

Website Address _____

Trade References:

Company Name

Fax Number

Phone Number

I agree that all the above information is correct, and I (we) authorize BookMasters to make any credit inquiries.

AUTHORIZED SIGNATURE

TITLE

DATE