

### Contact Information

\* denotes required fields

\* Company Name: \_\_\_\_\_

\* Contact Name: \_\_\_\_\_

\* Bill to Address: \_\_\_\_\_

\* Ship to Address: \_\_\_\_\_

\* Phone: \_\_\_\_\_ \* Fax: \_\_\_\_\_

\* Email: \_\_\_\_\_

Website Address: \_\_\_\_\_

### Background Information

Type of Business (check one)

Sole Proprietorship  Partnership  Corporation

Years in Business \_\_\_\_\_

President/Owner \_\_\_\_\_

No. of Employees \_\_\_\_\_

Type of Business \_\_\_\_\_

Dun & Bradstreet # \_\_\_\_\_

Annual Sales (in dollars) \_\_\_\_\_

Estimated value of initial order (in dollars) \_\_\_\_\_

Estimated monthly and annual Purchases from  
Worldlabel.com Inc. (in dollars) \_\_\_\_\_

### Bank Information and Trade References

Bank \_\_\_\_\_

Contact \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Checking Acct. # \_\_\_\_\_

Saving Acct. # \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Everything stated above is correct and complete. Worldlabel.com Incorporated is authorized to investigate the information stated above including but not limited to the bank and trade references to verify the financial condition of the applicant company. All cost of collection will be debtor's responsibility, including a reasonable attorney's fee, should collection through an attorney be necessary. I am duly authorized to execute this application on behalf of the applicant.

By: \_\_\_\_\_ Print Name: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_