



PO Box 13308  
49 Wireless Blvd., Suite 150  
Hauppauge, NY 11788

ROBERT ALLEN BEACON HILL Customer Service 800-333-3777

DURALEE HIGHLAND COURT BAILEY & GRIFFIN CLARKE & CLARKE  
JAMES HARE LULU DK STUDIO G Customer Service 800-275-3872

ROBERT ALLEN DURALEE GROUP

# CREDIT APPLICATION

**PLEASE RETURN YOUR COMPLETED APPLICATION  
ALONG WITH A COPY OF YOUR RESALE CERTIFICATE TO:**

email: [newaccounts@tradgroup.com](mailto:newaccounts@tradgroup.com) fax: 800-275-3297

BUSINESS NAME \_\_\_\_\_ DATE \_\_\_\_\_ ACCT NO \_\_\_\_\_

## Financially Responsible Party

TRADE NAME (BILLING) \_\_\_\_\_

LEGAL NAME \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_

SHIPPING ADDRESS (NO PO BOX ALLOWED) \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_

PHONE # \_\_\_\_\_ FAX # \_\_\_\_\_

BUSINESS FEDERAL ID# \_\_\_\_\_ EMAIL \_\_\_\_\_

BUSINESS IS A  PROPRIETORSHIP  PARTNERSHIP  CORPORATION

TYPE OF BUSINESS \_\_\_\_\_ COMPANY WEBSITE \_\_\_\_\_ DATE EST \_\_\_\_\_

*The Robert Allen Duralee Group is required by law to collect sales tax in certain jurisdictions. It is the responsibility of the account to provide a resale certificate if applicable. The Robert Allen Duralee Group will charge sales tax if no resale certificate is provided in advance.*

## Contacts

ACCOUNTS PAYABLE/INVOICES

ORDER CONFIRMATIONS

PRODUCT INFORMATION

NAME \_\_\_\_\_

NAME \_\_\_\_\_

NAME \_\_\_\_\_

EMAIL \_\_\_\_\_

EMAIL \_\_\_\_\_

EMAIL \_\_\_\_\_

TELEPHONE # \_\_\_\_\_

TELEPHONE # \_\_\_\_\_

TELEPHONE # \_\_\_\_\_

FAX # \_\_\_\_\_

FAX # \_\_\_\_\_

FAX # \_\_\_\_\_

I would like to receive invoices

I would like to receive confirmations

I would like to receive marketing

by email  Y  N

by email  Y  N

information by email  Y  N

**If Incorporated** Please provide name, home address, telephone number and email address of owner or authorized officer.

**1st**  
NAME \_\_\_\_\_

**2nd**  
NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

PHONE # \_\_\_\_\_

PHONE # \_\_\_\_\_

EMAIL \_\_\_\_\_

EMAIL \_\_\_\_\_

**Terms Requested**  NET 30 DAYS  PROFORMA

*By signing this below you, in addition to your agreement to submission of this application to The Robert Allen Duralee Group for approval, you agree to submission of this credit application to companies we represent for approval. Approval of net 30 terms is at each of our discretions. We each reserve the right to refuse, close or restrict accounts. I/We will not use The Robert Allen Duralee Group images or logos to promote discounted sales events or discounts. Using The Robert Allen Duralee Group images in conjunction with sales/discounts may result in termination of account status.*

**SIGNATURE (Owner or Authorized Officer of Company)**

**DATE**



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**Bank Information**

BANK NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_  
PHONE # \_\_\_\_\_ OFFICER \_\_\_\_\_

**Trade References** Please list all active sources and account numbers below

**FABRIC**

\_\_\_\_ New Business - Trade references not yet established \_\_\_\_\_ Schumacher \_\_\_\_\_  
Pindler \_\_\_\_\_ Seabrook \_\_\_\_\_  
Fabricut \_\_\_\_\_ Stout Bros \_\_\_\_\_  
Hunter Douglas \_\_\_\_\_ Thibaut \_\_\_\_\_  
Kravet \_\_\_\_\_ York Wallcoverings \_\_\_\_\_  
Maharam \_\_\_\_\_ Norbar \_\_\_\_\_

**FURNITURE**

\_\_\_\_ New Business - Trade references not yet established \_\_\_\_\_ Lee Industries \_\_\_\_\_  
A.Rudin \_\_\_\_\_ Pearson \_\_\_\_\_  
Baker \_\_\_\_\_ Sherrill \_\_\_\_\_  
Century \_\_\_\_\_ Southwood \_\_\_\_\_  
Charles Stewart \_\_\_\_\_ Taylor King \_\_\_\_\_  
Henredon \_\_\_\_\_ TCS \_\_\_\_\_  
Hickory Chair \_\_\_\_\_

**ADDITIONAL CREDIT REFERENCES** Please include Name, Address, Telephone Number and Account Number

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**About My Business** I have an existing book library  Yes  No

**Office Use Only**  
SALES REPRESENTATIVE \_\_\_\_\_ SALES REPRESENTATIVE # \_\_\_\_\_