

APPLICATION FOR ACCOUNT

	DATE:
NAME:	
ADDRESS:	
CITY / STATE / ZIP CODE:	
TELEPHONE: ()	
OWNER.	
NEW YORK STATE DESALE NO.	
Graduate of Institute qualifying as Interior Decorator:	
Former business connections:	
Number of years in own business:	
Line of business:	
Please list three or more firms with which you have a	
	indiac.
Name of Bank and Account No:	
Branch and Telephone No:	
Registered with Allied Board of Trade	
Lyon Mercantile Agency	
Dun & Bradstreet	
	Principal (please print)
	Signature