



**COMPANY INFORMATION**

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

Purchasing Contact: \_\_\_\_\_ A/P Contact: \_\_\_\_\_

Will you send a copy of your independently reviewed Financial Statement? \_\_\_\_\_

If No, Why? \_\_\_\_\_

What type of Corporation are you?  S-Corp  C-Corp  Partnership  Sole Proprietorship

How long have you been in business? \_\_\_\_\_

Nature of your business? \_\_\_\_\_

Number of Employees: \_\_\_\_\_

What is your average Revenue for the last three years? \_\_\_\_\_ Debt? \_\_\_\_\_

Fed Id # \_\_\_\_\_

Please provide on a separate sheet the names, addresses, and Tax numbers of any related corporations

(Parent Companies, Subsidiaries, DBA, Sister Companies, etc.)

**TRADE REFERENCE**

Name: \_\_\_\_\_

Account#: \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

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Name: \_\_\_\_\_

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Phone: \_\_\_\_\_

Fax: \_\_\_\_\_



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 Zip Code: \_\_\_\_\_  
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 State: \_\_\_\_\_  
 Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Fax: \_\_\_\_\_

***PLEASE RETURN FORM TO:***

Commercial and Industrial Design Co, Inc.  
 20372 N. Sea Circle  
 Lake Forest, CA 92630  
 Attn: Credit Dept.  
 Fax: 949-273-6781

**BANK REFERENCE**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_  
 Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Fax: \_\_\_\_\_  
 Account Number: \_\_\_\_\_

By the signing of this form I hereby grant permission to the above bank and trade references to release credit information to Ci Design Co., Inc.

Signature: \_\_\_\_\_

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

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

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