

# *Pavingstone Supply, Inc.*

4401 11<sup>th</sup> Ave. NW. Seattle, WA 98107 Ph. (206) 783-2811 Fax (206) 706-0370

[www.pavingstonesupply.com](http://www.pavingstonesupply.com)

Credit Application		
Date:		
Company Name:		Years in Business:
Phone:	Fax:	E-Mail:
Company Address:		
City:	State:	ZIP:
Mailing Address (If different than mailing address):		
City:	State:	ZIP:
Billing Contact Person:		Title:
Type of Business:		
Contractor's Registration No.:		Exp.Date:
Bonding Company:		Bond No.:
Have any claims been filed against your bond? (Yes/No) If yes please explain.		
State Tax No.:		
*(Resale Tax Card Must be Attached or Sales Tax will Be Charged)		
<b>COMPLETE THE ONE</b> section which applies to the above company name:		
<b>Corporation Or Limited Liability Company (Attach sheet if needed)</b>		
Chartered in State of:		Date:
Officer:	SSN:	Phone:
Address:		
City:	State:	ZIP:
<b>Sole Proprietorship</b>		
Owner Name:	SSN:	Phone:
Residence Address:		
City:	State:	ZIP:
<b>Partnership:    General ( )    Limited ( )</b>		Start Date:
Partner (1)	SSN:	Phone:
Residence Address:		
City:	State:	ZIP:
Partner (2)	SSN:	Phone:
Residence Address:		
City:	State:	ZIP:

**\*Please Note:**

This is a preliminary application – full credit approval uses signed page forms. Please call for details.