

LIFESTYLE FLOORING, INC.

5723 Benjamin Center Drive
Tampa, Florida 33634
Office: (813) 248-1793
Fax: (813) 367-0197
Email: credit@lifestyleflooringinc.com

Credit Application and Contract Apartment Properties (Please Type or Print Clearly)

1. Property Location:

Name		
Street Address		
City	State	Zip
Phone Number	Fax Number	
Contact Name	Email address	

2. Property Owner:

Name			
Street Address			
City	State	Zip	
Phone Number	Fax Number		
Is this a: Corporation	Partnership	Proprietorship	LLC
If a partnership, name and address of general manager _____ _____			

3. Property Management Company:

Name		
Street Address		
City	State	Zip
Phone Number	Fax Number	
Is this a: Corporation	Partnership	Proprietorship
If a partnership, name and address of general manager _____ _____		

4. Banking Information:

Bank Name		
Street Address		
City	State	Zip
Phone Number	Fax Number	
Account #		
Bank Officer to Contact		

5. Credit References: *(List 5 local suppliers with established credit. Please exclude Home Depot)*

1. Name _____	Address _____
Phone Number _____	Fax Number _____ Account # _____
2. Name _____	Address _____
Phone Number _____	Fax Number _____ Account # _____
3. Name _____	Address _____
Phone Number _____	Fax Number _____ Account # _____
4. Name _____	Address _____
Phone Number _____	Fax Number _____ Account # _____
5. Name _____	Address _____
Phone Number _____	Fax Number _____ Account # _____

6. General Information:

Are purchase orders required?	YES	NO	
Send invoices to:	Property Location	Property Owner	Property Mgmt. Co.
Send statements to:	Property Location	Property Owner	Property Mgmt. Co.
Accounts payable officer or supervisor	Phone Number		
Accounts Payable Email Address			
Name of Property Manager	Phone Number		
Name of Property Supervisor	Phone Number		
Credit requested \$ _____ Estimated Monthly Orders \$ _____			
To help us establish credit limit, please provide number of units: Total _____			
Eff _____	1 BR _____	2 BR _____	3 BR _____ 4 BR _____
Is property tax exempt?	YES	NO	
If yes, please attach signed exemption certificate			

CERTIFICATION

I, (We) authorize any person having information as to the above named firm to release financial information and credit reports to Lifestyle Flooring. I, (We) understand that the information furnished to you on this application for account is for the purpose of obtaining credit from your firm. I, (We) understand that your firm may at any time refuse to grant credit to me, us, even though credit is initially granted pursuant to this application. I am, (We are) authorized in my (our) capacity to bind my (our) firm for any and all credit that you extend to us. It is further agreed and understood that all accounts or monies due Lifestyle Flooring shall be due and payable net 30 days at its office in Tampa, Hillsborough County, Florida; that all past due accounts, notes, or judgments shall bear interest from the date the indebtedness is first incurred until paid at the maximum rate allowed by law. If the account or notes are placed with a third party for collection, then the debtor is liable for reasonable attorney's fees and all reasonable cost incurred in the collection of the indebtedness.

Name of Firm _____

Signature: _____ Date: _____

Printed Name: _____ Phone Number _____

Title: _____ Email _____

Lifestyle Sales Representative:
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