

EUROPATEX

MANUFACTURER • HOME FABRICS • TRIMMINGS • ACCESSORIES

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NEW ACCOUNT APPLICATION FORM

Company Name _____

Billing Address _____

City _____ State _____ Zip _____

Contact Name _____ Phone _____ Fax _____

Email _____ Fed I.D./SSN/Tax I.D. _____

Company Website _____

Type of Business: Upholstery Window Treatment Event/Table Topper
(Select all that apply) Interior Designer Wholesale/Retail Store E Commerce

We operate in _____ Year Established _____

Our legal entity is: Corporation LLC Partnership Sole Proprietorship

(If a corporation, list parties & titles. If other entity, list names of partners or owners)

The following are three trade references we are presently doing business with:

Company name Acct # Phone # Fax#

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Company name Acct # Phone # Fax#

NOTE: EuropaTex Inc. is a wholesale manufacturer selling to the trade only. To open up an account please submit your resale licenses along with this new account application by fax to: (201) 418-8599 or by email to: customerservice@europatex.com