

CUSTOMER PROFILE FORM

BUSINESS NAME _____
 ADDRESS _____
 CITY/STATE/ZIP _____
 TELEPHONE _____

FORM OF ORGANIZATION: CORPORATION PARTNERSHIP INDIVIDUAL

FEDERAL I.D. # _____ DATE BUSINESS STARTED _____

HOW MANY WORKERS DO YOU NEED TO ORDER? _____

WHAT TYPE OF WORK IS INVOLVED? _____

CREDIT REFERENCES:

	Name	Phone
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____

BANK REFERENCE:

NAME OF BANK: _____ BRANCH: _____

ACCOUNT #: _____

TYPE OF ACCOUNT: CHECKING SAVINGS OTHER: _____

PRINCIPALS OF FIRM:

Name/Title	Address	Telephone	Social Security #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

NOTICE: The following is provided for your information in the event that your credit is approved.
Please read the credit plan and do not sign this agreement before you do.

1. Undersigned agrees to pay each invoice on receipt.
2. Undersigned acknowledges and grants permission to Pacesetter Personnel Service to access any credit information available on their company and/or principals in order to establish this credit account.
3. In consideration of temporary personnel provided to Purchaser, each of the persons whose signatures appear below personally guarantee payment in full of the account. This guaranty is continuing and irrevocable while there is any unpaid balance due on the account.

SIGNATURE _____

SIGNATURE _____

NAME _____

NAME _____

TITLE _____

TITLE _____

DATE _____

DATE _____

FOR OFFICIAL USE ONLY

CREDIT APPROVED _____

CREDIT DENIED _____

DATE _____

OFFICE LOCATION _____

ORDER TAKEN BY _____ REFERRED BY _____ APPROVED BY _____

SALES TERRITORY _____ WORKMANS' COMP CLASS _____ CGL _____

ACCOUNT NO. _____ BILL RATE _____

REMARKS: _____
