



120 South Victory St.  
Little Rock, AR 72201  
Toll Free (US): 1-800-643-8345  
Toll Free (AR): 1-800-482-5946  
Local Phone: 1-501-374-8256  
Fax Number: 1-501-374-7564

## NEW ACCOUNT REQUEST FORM

ALL INFORMATION MARKED WITH \* IS REQUIRED

### **Contact Information**

\*Business Name: \_\_\_\_\_  
\*Your Name: \_\_\_\_\_ \*Your Position: \_\_\_\_\_  
\*Phone #: \_\_\_\_\_ Alt. Phone #: \_\_\_\_\_  
\*E-mail Address: \_\_\_\_\_ Fax #: \_\_\_\_\_  
Company Website URL: \_\_\_\_\_  
\*Shipping Address Line 1: \_\_\_\_\_  
Shipping Address Line 2: \_\_\_\_\_  
\*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Zip Code: \_\_\_\_\_

\*Does the Company Billing Address Differ from the Shipping Address? Yes: \_\_\_\_\_ No: \_\_\_\_\_  
(If **Yes**, please fill out Billing Address Information Below.)

### **Billing Information** (only if different than above)

\*Billing Address Line 1: \_\_\_\_\_  
Billing Address Line 2: \_\_\_\_\_  
\*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Zip Code: \_\_\_\_\_

### **Home Office Information** (if applicable and different than above)

Home Office Address Line 1: \_\_\_\_\_  
Home Office Address Line 1: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### **Store Hours:**

\***Monday:** From: \_\_\_\_\_ To: \_\_\_\_\_ \***Tuesday:** From: \_\_\_\_\_ To: \_\_\_\_\_  
\***Wednesday:** From: \_\_\_\_\_ To: \_\_\_\_\_ \***Thursday:** From: \_\_\_\_\_ To: \_\_\_\_\_  
\***Friday:** From: \_\_\_\_\_ To: \_\_\_\_\_ \***Saturday:** From: \_\_\_\_\_ To: \_\_\_\_\_  
\***Sunday:** From: \_\_\_\_\_ To: \_\_\_\_\_

### **Business Information**

\*Type of Business: (i.e. Formalwear Specialist, Bridal Shop, Men's Clothier, Flower Shop, Other: Please Specify)

\*Type of Company: (Corporation, Subsidiary Corp, Sole Proprietorship, Partnership, Joint Venture, Other: Please Explain)

\*Age of Business: \_\_\_\_\_ D&B Rating: \_\_\_\_\_

**Corporation Information** *(if applicable)*

Incorporated Name: \_\_\_\_\_  
Incorporated Address Line 1: \_\_\_\_\_  
Incorporated Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Management Information**

\*Store Manager Name: \_\_\_\_\_  
\*Phone #: \_\_\_\_\_ Alt. Phone #: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ Fax #: \_\_\_\_\_  
Manager Address Line 1: \_\_\_\_\_  
Manager Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Additional Manager Information** *(if applicable)*

\*2<sup>nd</sup> Store Manager Name: \_\_\_\_\_  
\*Phone #: \_\_\_\_\_ Alt. Phone #: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ Fax #: \_\_\_\_\_  
Manager Address Line 1: \_\_\_\_\_  
Manager Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Company Owners, Officers, or Partners Information**

\*Officer Name: \_\_\_\_\_ \*Title: \_\_\_\_\_  
\*Phone #: \_\_\_\_\_ Alt. Phone #: \_\_\_\_\_  
\*E-mail Address: \_\_\_\_\_ Fax #: \_\_\_\_\_  
\*Officer Address Line 1: \_\_\_\_\_  
Officer Address Line 2: \_\_\_\_\_  
\*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Zip Code: \_\_\_\_\_

**Additional Company Owners, Officers, or Partners Information** *(if applicable)*

\*2<sup>nd</sup> Officer Name: \_\_\_\_\_ \*Title: \_\_\_\_\_  
\*Phone #: \_\_\_\_\_ Alt. Phone #: \_\_\_\_\_  
\*E-mail Address: \_\_\_\_\_ Fax #: \_\_\_\_\_  
\*Officer Address Line 1: \_\_\_\_\_  
Officer Address Line 2: \_\_\_\_\_  
\*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Zip Code: \_\_\_\_\_

**Financial Information**

\*Bank Name: \_\_\_\_\_ \*Bank Officer Name: \_\_\_\_\_  
Local Phone #: \_\_\_\_\_ Toll Free Phone #: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ Fax #: \_\_\_\_\_  
Bank Address Line 1: \_\_\_\_\_  
Bank Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Trade Creditors** *(At least two Formalwear Wholesalers or Manufacturers if possible)*

**1.)**

\*Business Name: \_\_\_\_\_ \*Account #: \_\_\_\_\_  
Contact Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ Fax #: \_\_\_\_\_  
Address Line 1: \_\_\_\_\_  
Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**2.)**

\*Business Name: \_\_\_\_\_ \*Account #: \_\_\_\_\_  
Contact Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ Fax #: \_\_\_\_\_  
Address Line 1: \_\_\_\_\_  
Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Additional Trade Creditors** *(if applicable)*

**3.)**

\*Business Name: \_\_\_\_\_ \*Account #: \_\_\_\_\_  
Contact Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ Fax #: \_\_\_\_\_  
Address Line 1: \_\_\_\_\_  
Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**4.)**

\*Business Name: \_\_\_\_\_ \*Account #: \_\_\_\_\_  
Contact Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ Fax #: \_\_\_\_\_  
Address Line 1: \_\_\_\_\_  
Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Additional Information**

**\*How did you hear about Paul Morrell?** *(Check One)*

Internet Search: \_\_\_\_\_ Direct Mail: \_\_\_\_\_ MyTuxedoCatalog.com: \_\_\_\_\_ Vows Magazine: \_\_\_\_\_  
Another Store Owner: \_\_\_\_\_ Word of Mouth: \_\_\_\_\_ Other: \_\_\_\_\_ (Please Explain in Comments Below)

**\*Do you own your own stock of tuxedos?** *(Check One)*

Yes: \_\_\_\_\_ No: \_\_\_\_\_

**\*Have you had an account with Paul Morrell previously?** *(Check One)*

Yes: \_\_\_\_\_ (Please include PM Account # in Comments Below) No: \_\_\_\_\_

**If you have previous experience with Paul Morrell, under what name was the account carried?**

\_\_\_\_\_

**\*List any other Paul Morrell accounts owned by the same entity as above:**

\_\_\_\_\_

**Additional Comments:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I hereby certify that all of the above information is truthful, complete, and accurate to the best of my knowledge.

**\*Name** (Printed): \_\_\_\_\_

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

**\*Today's Date:** \_\_\_\_\_