

OFFICE USE

INIT:

NEW BAP #:

BELOVED ART PARTNER APPLICATION

FAX COMPLETED APPLICATION TO 541-772-8046. Allow 1 to 3 business days for approval. You will receive email confirmation of approval along with your new **Beloved Art Partner Identification Number (BAP#)**.

Applicant Information

Business Name _____

Business Address _____

Will orders be shipping to other locations? Yes No

Website Address _____ May we add you to our website "Links" page? Yes No

Contact Name _____ Email _____

Telephone _____ Fax _____

Financial Information

Bank _____ Branch / Address _____

Telephone _____ Officer _____

Business / Credit References

1 Name _____ Address _____
Telephone _____

2 Name _____ Address _____
Telephone _____

3 Name _____ Address _____
Telephone _____

Accounting Information

Monthly statements and all correspondence pertaining to this account should be mailed to:

Name _____ Phone _____

Mailing Address _____ Email _____

Will Purchase Order (PO) Numbers be used? Yes No

I (we) understand that the information furnished on this form is for the purpose of establishing a CREDIT and WHOLESale PRICING relationship with Beloved Art (a division of ProVisual Design, Inc.). I am authorized, in my capacity, to bind our company accordingly.

Applicant Signature _____ Title _____ Date _____

TERMS: Beloved Art will bill on the last business day monthly. Full payment is due within 10 days after receipt of statement. MAKE PAYMENTS TO: BELOVED ART - 3091 Lone Pine Road, Medford, Oregon 97504 • 541-842-8944 / Fax 541-772-8046