



LAGNIAPPE RESOURCES INC.
PROFESSIONAL EMPLOYMENT REFERENCES

APPLICATION FOR SERVICE

<i>General Company Information</i>	
Company Name: _____	
Branch/Division Name: _____	
DBA: _____	Federal Tax ID #: _____
Mailing/Billing Address: _____	
Physical Address (if different): _____	
Are you working out of a private residence? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Company Phone #: _____	Company Fax #: _____
Website Address: _____	Years in Business: _____
<input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Individual/Sole Proprietor <input type="checkbox"/> Non-Profit	
Number of Employees: _____	Number of Anticipated Hires Next Twelve Months _____
Type of Industry? _____	
Please provide a brief description of your company, products and services.	
Please describe the specific purpose for which your company will be using services provided by Lagniappe.	
<i>Name of Owner(s) or Principal(s)</i>	
Name: _____	Address: _____
Title: _____	Phone #: _____ Email: _____
Name: _____	Address: _____
Title: _____	Phone #: _____ Email: _____
Name: _____	Address: _____
Title: _____	Phone #: _____ Email: _____
<i>Banking Information</i>	
Name of Bank: _____	Branch: _____
Phone #: _____	Fax #: _____
Address: _____	
Checking Account #: _____	

Trade References (Companies that have extended you credit)

Name of Business: _____	Address: _____	
Contact: _____	Phone #: _____	Email: _____
Name of Business: _____	Address: _____	
Contact: _____	Phone #: _____	Email: _____
Name of Business: _____	Address: _____	
Contact: _____	Phone #: _____	Email: _____

User Contact Information

Primary Contact Person

Name : _____	Title: _____	
Phone #: _____	Fax #: _____	Email: _____

Alternative Contact Person(s)

Name : _____	Title: _____	
Phone #: _____	Fax #: _____	Email: _____
Name: _____	Title: _____	
Phone#: _____	Fax #: _____	Email: _____
Name: _____	Title: _____	
Phone #: _____	Fax #: _____	Email: _____

I certify that I have read the above statements and all information provided is accurate. I hereby authorize the Bank Reference to release information to Lagniappe Resources, Inc.

Company Name: _____
Authorized Signature: _____
Printed Name of Authorized Individual: _____
Title: _____
Date: _____