

Country Lumber, Inc.

CREDIT APPLICATION

Email to: kdesanti@countrylumber.com

□ Individual

□ Business

Submitted by:

	2237 FX : (203) 272-8751	Outsid Sales	de person:	
Date of Application:				
Account Name:		DBA:		
Phone:	Email:	Fax:		
Billing Address: Street:	City: _		State:	Zip:
Delivery Address Street:	City:		State:	Zip:
Federal ID #	Anticipated Monthly (Credit Requested:		
Type of Business:	☐ Sole Proprietorship ☐ Partnership ☐ Corpor	ation LLC Not for Profit	Date Started:	
PO Required:	☐ Yes or ☐ No (Please check one)	Number of Years in Business: _		
	List all Principals	Owners of your Firm:		
Name & Title:			SS#:	
Phone:	Date of Birth:	Motorist ID#:	State:	
Number of Year at thi	s Address:	Email:		
Name & Title:			SS#:	
Phone:	Date of Birth:	Motorist ID#:	State:	
Number of Year at thi	s Address:	Email:		
Have you or your prin	cipal done business under a different name within th	e past five (5) years? Yes:	No:	
If yes, Name:	Address:			
	<u>Trade References (At Least Two, must</u>	be other Suppliers, not of	<u>ther Contractors)</u>	
Name:	Address:		Phone:	
Name:	Address:		Phone:	
	Address:		Phone:	

Bank References

Bank Name:		Account #:	Contact:	
City:	State:	Phone:	Fax:	
Bank Name:		Account #:	Contact:	
City:	State:	Phone:	Fax:	
	Authorization to	Release Credit Informa	<u>tion</u>	
To: Bank Name:				
Street:	(City:	State:	Zip:
Country Lumber, Inc., our supplier of building consideration. Please see below the author				e of credit
Company Name:		Acct #:		
Street:	(City:	State:	Zip:
Authorized Signature: Title:		Date:		
Title:		Date		
	Credit Information	n Release and Credit Te	<u>erms</u>	
☐ Sale will be Taxable ☐ Sale will not be	e Taxable If No tax	is to be Paid, Must attach Ro	e-Sale Certificate ATTACH	HED □ Yes
I do hereby authorize the release to Country of this Application. I do hereby agree, as an from the date of invoice and that a late charbalances outstanding at the close of the nex payment is not dependent on ultimately receives necessary to collect any past due amounts.	authorized representative ge of .083% per month t billing cycle. Purchaser eiving payment by end us	e of the Business Applicant, th (an annual rate of 12%) or m agrees to pay all open invoice er of job. Applicant agrees to p	nat the credit terms are the net ca aximum amount allowed by law vers within the credit terms period a pay all reasonable collection cost	sh due 30 days will be charged on and agrees that as and attorney's
The undersigned personally guarantees the			med Business Credit Applicant mber, Inc., its successors or assi	ans now existina
or which is incurred hereafter and in whatever change in terms or any legal disability of the demand, protest or notice of default and any enforcing this Guaranty. Guarantor specifical Association.	Business to perform its or requirement that Country	ced. This Guaranty shall be ab obligation under this agreeme ry Lumber, Inc. exhaust any rig	solute and unconditional, irrespe nt. The primary, direct, undersign pht to take any action against said	ctive of any ed waives any d Business before
Authorized Signature:		Print Name:		Date: