



CREDIT APPLICATION

Credit Request \$ _____

Name _____

Phone No. _____

Address (Mailing) _____

Cell No. _____

Fax No. _____

Address (Physical) _____

Email _____

Type Of Business: _____

Business License#: _____

Corporation Type: _____ Partnership Type: _____ Individual: _____

State of Incorporation: _____ Date of Incorporation: ____/____/____ Business Commenced: ____/____/____

Does your company pay Sales Tax? _____ If not, please submit a signed Tax Exempt Certificate with this application. Tax# _____

PRINCIPAL OWNER(s) or OFFICER(s): A credit report will be run on all Owner(s)/Partner(s) listed.

NAME(s) TITLE HOME ADDRESS(es) SOCIAL SECURITY NO.

Authorized Purchasers: _____

Accounts Payable Contact: _____ Are Purchase Orders Required: _____

Lot & Block of Project: _____ (PLEASE FORWARD A COPY OF ANY DRAW SCHEDULE IF APPLICABLE)

HAS THE COMPANY OR PRINCIPALS BEEN A DEBTOR IN A BANKRUPTCY WITHIN THE LAST TEN YEARS? _____

BANK ACCOUNTS: I hereby authorize the bank(s) named herein to release financial information requested by Dunkirk Supply, Inc. (DSI) and/or Howlin Concrete, Inc. (HCI) for the purpose of extending and/or reviewing my company's credit periodically.

NAME OF BANK OR S&L ADDRESS TYPE ACCOUNT#

Authorized Signature(s): _____

Date of Signature(s): _____

CREDIT REFERENCES: Suppliers with whom business has been conducted in the last 12 months. Please supply a minimum of three.

NAME ACCT. # PHONE NO. FAX NO.

THE FOLLOWING ARE STATEMENTS OF ACCOUNT TERMS OF:

The information provided is being submitted for your consideration as a basis for opening an account for us. We certify that the information given is correct. Our understanding is that this information is for the use of your credit department only and will be held in the strictest confidence.

BuilderUp, LLC - Statements are rendered monthly. Cash discounts will be allowed only for materials billed before the end of the month if payment is made by the 10th of the following month and there are no other outstanding past due balances. This discount term applies to established accounts only.

ACCOUNTS ARE ALSO SUBJECT TO THE FOLLOWING CONDITIONS

- 1) Payment not received within thirty (30) days shall accrue interest at the rate of two percent (2%) per month.
- 2) Credit privileges may be suspended with or without prior written notice. (Accounts not paid within sixty (60) days will be placed on a "HOLD" status with or without prior notice.)
- 3) Credit privileges of accounts with a stipulated line of credit may be automatically suspended when the credit limit is reached.
- 4) Should this matter be turned over to an attorney for collection, the Buyer shall be responsible for all cost of collection, including reasonable attorneys' fees.

The person(s) executing this agreement has authority to bind the customer and is authorized by the customer to enter into the credit application terms and conditions.

We have read the above items, understand them, and agree to them. Our firm is financially able to meet any commitments we have made and we expect to pay your invoices according to your terms. The undersigned hereby authorizes DSI/HCI to obtain verification from any source named herein or from any credit-reporting bureau or investigative agency (including obtaining a credit report containing credit card or other account numbers of the undersigned).

NAME OF FIRM OR CORPORATION _____

DATE: _____ SIGNED BY: _____
(Signature) *(Name Printed)*

(Company Title)

In consideration of your extended credit to the firm of _____ and in further consideration of the delivery of certain materials or service to said firm, we, the undersigned do hereby jointly and individually guarantee the payment by said firm on the terms stated above. We, the undersigned further waive notice of nonpayment of the account by the said firm and further agree that all or any of the undersigned may be jointly and/or severally liable. In the event legal collection is instituted we agree to pay all attorney fees and collection costs.

Signature Guarantor *(Name Printed)* _____
Signature Guarantor *(Name Printed)*

Sworn before me this _____ day of _____ 20 _____

_____ (My commission expires) _____