

Office Use Only:	
Salesman	Reviewed by
Customer No.	Date

CREDIT APPLICATION

4100 Washington Ave N. Minneapolis, M	N 55412 · TEL: 612-521-4		-4785 · TOLL FREE	
Legal Business Name		State Business	ID	
Billing Address			State	Zip
Shipping Address			State	
Business Phone			red Credit Amount	
Type of Business D				
Accounts Payable			1	
Purchasing Agent			1	
Name and complete address of owners or c	officers and their titles:			
Name		Title		
Address			State	
Name				
Address			State	
Are you exempt from sales tax? No	Yes If yes, a tax exem	ption certificate must b	oe provided State Tax	x ID#
PERSONAL GUARANTY: I,(Your Name)	, located at	(Company Address)	for and in co	nsideration of your
extending credit at my request to(Coi hereby personally guarantee to you the payment at <u>In</u> bind myself to pay on demand any sum which may be indebtedness of the company. I do hereby waive noti hereby guaranteed.	mpany Name) dustrial Lumber & Plywood, Inc. in the secome due to you that this guaranty second due to you that this guaranty due to you the you that this guaranty due to you the you think the you that this guaranty due to you the you the you think the you think the you think the you think the you the you think the you the you the you the you the you think the you the you the you the you	after referred to as the "Company" the State of Minnesota of any shall be a continuing and irrev	obligation of the Company	and I hereby agree to nity for such
> APPLICANT SIGNATURE :			Date:	
PRINTED NAME:		TITLE:	_	
OUR TERMS ARE: NET 30 DAYS FROM I A service charge of 1 ½% (18% APR) per mont I authorize you to verify and collect information commercial credit reports. The application has lamy account is accepted, I agree to pay according expenses including attorney's fees incurred by I	th will be charged on all invoices in on me, including but not limite been carefully prepared by the un g to Industrial Lumber & Plywoo	ed to bank references, trade indersigned and is to my kn od, Inc.'s terms of sale. It	e credit references, consu nowledge complete, accu further agree to pay for c	mer and/or rate and truthful. If ollection costs and
> APPLICANT SIGNATURE:			Date:	
PRINTED NAME:		TITLE:	_	



REFERENCES & COMMUNICATION

			& COMMUNICATION	
Bank Reference:				
Name		Address		
Account #	Phone	Fax	Officer	
	me:	Phone #	Email	
present and future. statements, acknow	This includes but is not linulated places of includes	nation pertaining and relating nited to quotations, proposals	me) authorizes Industrial Lumber & Plywood, to business conducted between our companies , lumber sale mailings, information, invoices, communication for conducting business. the following email:	
□ email:				
·	npany would like to receiv	re monthly flyers at the fol	lowing email:	
□ Do not wish to red				
How did you hea	ar about Industrial Lum	ber & Plywood, Inc.?		

4100 Washington Ave N. Minneapolis, MN 55412 · TEL: 612-521-4767 · FAX: 612-521-4785 TOLL FREE: 800-292-4118 · www.industriallumber.net