

# All America Plywood Credit Application

Name:  Address:

City:  State:  Zip Code:

Phone Number  Fax:

Delivery Address

Type of Buesiness:  Date Opened:

Business is a(n):  Corporation  Partnership  Individual  Other DUNS#

Building:  Home/Garage  Lease  Own  Storefront/ Shop

Accounts Payable Contact:  Purchasing Contact:

Name of Bank:  Phone:  Account #:

Estimate of Monthly Purchases:  Taxable:  Exempt Number:

## Owner's, Officer's, Partner's Home Address

Name:  Title:  Address:

City:  State:  Zip Code:

Home Phone:  Driver's License:  Date of Birth:

Name:  Title:  Address:

City:  State:  Zip Code:

Home Phone:  Driver's License:  Date of Birth:

## Trade References (Include Name, Address, Phone, and Fax Number)

1.

2.

3.

4.

### Additional Information:

I agree the information on this applicaion is true to the best of my knowledge and agree to pay within the terms of 1% 30 Net 31 Days, and I agree to pay a time-price differential of 1.5% on any invoices which are past-due over 60 days regaurdless of whether I get paid as promptly for the job where the materials were used.

Signature Field  Current Date

For Office Use Only: P.C.:  Salesperson #:  Ship Via Territory:  Approval: