

## CREDIT APPLICATION FOR A BUSINESS ACCOUNT

Business Contact Information			
Company name:			
Phone:	Fax:	E-mail:	
Registered company address:			
City:		State:	ZIP Code:
Date business commenced:	Business	EIN:	
Sole proprietorship:	Partnership:	Corporation:	Other:
DBUSINESS AND CREDIT INFORMATION			
Primary business address:			
City:		State:	ZIP Code:
How long at current address?			
Telephone:	Fax:	E-mail:	
Bank name:			
Bank address:		Phone:	
City:		State:	ZIP Code:
Type of account:	Account number:		
Savings			
Checking			
Business/trade references			
Company name:			
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
Type of account:	1 4.11		
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Company name:			
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	Zii Code.
Type of account:	Tax. E mail.		
Type of decount.			
Company name:			
Address:			
		State:	ZIP Code:
Phone:	Fax:	E-mail:	ZIF Coue.
Type of account:	гах.	L-IIIdii.	
AGREEMENT  1. All invoices are due on the 10 <sup>th</sup> of the following month.			
2. Claims arising from invoices must be made within seven working days.			
3. By submitting this application, you authorize OHIO LUMBER BRICK & BLOCK to make inquiries into the banking and business/trade references that you have supplied.			
4. A service charge of 2% per month (Annual Percentage Rate of 24%) will be assessed on any accounts not paid within terms.			
5. Returned Check Policy – for any returned check there will be a \$35.00 returned check fee charge.			
Signatures			
Title:		Title:	
Date:			
Date:		Date:	
Social Security #:		Social Security #:	



## PLEASE FAX, EMAIL, OR MAIL TO OUR OFFICE AT:

8890 ST RT 117
HUNTSVILLE, OHIO 43324
937-686-3780 (FAX)
kristitus@ohiolumber.com
ANY QUESTIONS, PLEASE CALL US AT
937-686-6434