FOR APPLICATION
ASSISTANCE, PLEASE
CALL OUR CREDIT DEPT
PH: 318-227-6355







BUILDERS SUPPLY COMPANY, INC. 1400 MARSHALL ST. PO. BOX 295, SHREVEPORT, LA 71162 PHONE 318-222-5721, FAX 318-429-8200 FAX COMPLETED APPLICATION TO FAX: 318-429-8200

## **COMPANY CREDIT APPLICATION**

I/We hereby apply for credit and certify that the information below 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.

|  | -  | i credit department only   |   | a iii tile strictes   | Comina   | siice.   |  |
|--|--|--|---|---|--|--|--|
| COMPANY  |  |  |   |   |  |  |  |
| MAILING ADDRESS  |  |  | CITY  |   | _ST  | ZIP  |  |
| MUNICIPAL ADDRESS_   |  |  | CITY  |   | _ST  | ZIP  |  |
| PHONE: ()  | CEL  | L: ()  |   | FAX:(   | )_   |  |  |
| EMAIL ADDRESS:   |  |  |   |   |  |  |  |
| TYPE OF OWNERSHIP:   | CORP   | PARTNERSHIP _  | SUBSIDIA  | ARY OF  |  |  |  |
| PRINCIPAL OWNERS:<br><u>NAMES</u>  | <u>SS#</u>   | <u>Drivers License</u>   | <u>POSITION</u>   | <u>ADDRESS</u>  |  |  |  |
| 1)   |  |  |   |   |  |  |  |
| 2)   |  |  |   |   |  |  |  |
| 3)   |  |  |   |   |  |  |  |
| LENGTH OF TIME IN BU   | SINESSI  | FORMER LOCATION  |   |   |  |  |  |
| TYPE OF BUSINESS   | PE OF BUSINESS EXPECTED MONTHLY PURCHASES \$   |  |   |   |  |  |  |
| TRADE ACCOUNTS:  |  |  |   |   |  |  |  |
| 1.)  |  |  |   |   |  |  |  |
| 2.)  |  |  |   |   |  |  |  |
| 3.)  |  |  |   |   |  |  |  |
| BANK REFERENCES: /   | NAME ADDRESS OFFICER   |  |   |   |  |  |  |
| 1.)  |  |  |   |   |  |  |  |
| DATE OF LAST FINANCI   | AL STATEMENT   |  |   |   |  |  |  |
| ARE YOU WORKING DIE  | RECTLY WITH A BUI  | LDERS SUPPLY SALESMA   | N? IF Y   | ES, NAME  |  |  |  |
| EST DATE YOU WILL NE   | ED THE FIRST ORDE  | R OF MATERIALS   | EST   | YARDS NEEDEI  | ) FOR FI   | RST ORDER  |  |
| WILL THIS ACCOUNT BI   | USED FOR A SPECI   | FIC JOB? YES / NO - IF   | YES, EXPLAIN  | BELOW   |  |  |  |
| TYPE OF JOB  | JOB ADDRESS  |  |   |   |  |  |  |
| PROPERTY OWNER   |  | ADDRESS  |   |   |  |  |  |
| BONDING COMPAN   | Υ  | ADDF   | ESS   |   |  |  |  |
|  |  | E NEEDED FOR THIS JOE  |   |   |  |  |  |
| I/We agree to meet the maximum allowed by land any of the personal determine the Company in the event this accounts. | nese terms if credit<br>aw. The undersigne<br>I guarantors, includi<br>y's continued credit<br>nt is referred to any | e and understand that y<br>is extended and that id<br>d consents to Builders S<br>ing credit reports, in ord<br>worthiness, and to under<br>attorney for collection,<br>information is furnished | nterest will be<br>supply Company<br>er to allow for<br>rtake efforts to<br>I/We agree to | charged on a<br>y obtaining cre<br>the extension of<br>collect any ba<br>pay reasonable | II past dedit records of credit of all ance over attorner or the attorner or t | ue accounts at the ds of the Company to the Company, to ved on the account by's fees which may |  |
| PRINT NAME AND   | AUTHOR   | IZED SIGNATURE   |   |   | DATE   |  |  |
|  |  |  |   |   |  |  |  |
| NACM   | APPROVED   |  | REASON DENIED   |   |  |  |  |