

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

**Builders  
Supply**



OVER  
**90**  
YEARS OF QUALITY  
AND SERVICE

BUILDERS SUPPLY COMPANY, INC.  
1400 MARSHALL ST. P.O. BOX 295,  
SHREVEPORT, LA 71162  
PHONE 318-222-5721, FAX 318-429-8200

FAX COMPLETED  
APPLICATION  
ATTN: CREDIT DEPT  
FAX: 318-429-8200

## INDIVIDUAL 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.

NAME - LAST \_\_\_\_\_ FIRST \_\_\_\_\_ MIDDLE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DOB \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ DRIVERS LICENSE # \_\_\_\_\_ STATE \_\_\_\_\_

PHONE: (\_\_\_\_\_) \_\_\_\_\_ CELL: (\_\_\_\_\_) \_\_\_\_\_ FAX: (\_\_\_\_\_) \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

OCCUPATION \_\_\_\_\_ EMPLOYER \_\_\_\_\_ HOW LONG? \_\_\_\_\_

SALARY \$ \_\_\_\_\_ OTHER INCOME \$ \_\_\_\_\_ SOURCE \_\_\_\_\_

SPOUSE'S NAME - LAST \_\_\_\_\_ FIRST \_\_\_\_\_ MIDDLE \_\_\_\_\_

SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DOB \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ DRIVERS LICENSE # \_\_\_\_\_ STATE \_\_\_\_\_

PHONE: (\_\_\_\_\_) \_\_\_\_\_ CELL: (\_\_\_\_\_) \_\_\_\_\_ FAX: (\_\_\_\_\_) \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

OCCUPATION \_\_\_\_\_ EMPLOYER \_\_\_\_\_ HOW LONG? \_\_\_\_\_

SALARY \$ \_\_\_\_\_ OTHER INCOME \$ \_\_\_\_\_ SOURCE \_\_\_\_\_

OWN HOME - AMT MORTGAGE\$ \_\_\_\_\_ RENT APT/HOME - AMT RENT\$ \_\_\_\_\_ # OF CHILDREN \_\_\_\_\_

NAME OF NEAREST RELATIVE & RELATIONSHIP \_\_\_\_\_

### BANK REFERENCE:

BANK \_\_\_\_\_ ADDRESS \_\_\_\_\_ LOAN OFFICER \_\_\_\_\_

CHECKING \_\_\_\_\_ SAVINGS \_\_\_\_\_ LOANS \_\_\_\_\_

WILL THIS ACCOUNT BE USED FOR A SPECIFIC JOB? YES / NO

IF YES, TYPE OF JOB \_\_\_\_\_ JOB ADDRESS \_\_\_\_\_

DO YOU HAVE INTERIM FINANCING? YES / NO

IF YES, BANK \_\_\_\_\_ ADDRESS \_\_\_\_\_ LOAN OFFICER \_\_\_\_\_

(PLEASE ASK YOUR LOAN OFFICER TO FAX US A LETTER OF INTERIM FINANCING)

### TRADE REFERENCES:

NAME \_\_\_\_\_ ADDR \_\_\_\_\_ ACCOUNT # \_\_\_\_\_

NAME \_\_\_\_\_ ADDR \_\_\_\_\_ ACCOUNT # \_\_\_\_\_

NAME \_\_\_\_\_ ADDR \_\_\_\_\_ ACCOUNT # \_\_\_\_\_

I/We the below signed acknowledge and understand that your terms are "Due 10<sup>th</sup> of month following purchase" and I/We agree to meet these terms if credit is extended and that interest will be charged on all past due accounts at the maximum allowed by law. The undersigned consents to Builders Supply Company obtaining credit records of the Company and any of the personal guarantors, including credit reports, in order to allow for the extension of credit to the Company, to determine the Company's continued credit worthiness, and to undertake efforts to collect any balance owed on the account. In the event this account is referred to any attorney for collection, I/We agree to pay reasonable attorney's fees which may occur for collection and/or suit. The above information is furnished accurate and complete to the best of my/our knowledge.

PRINT NAME

SIGNATURE

DATE

### OFFICE USE ONLY

APPROVED

REASON DENIED

SALESMAN