

Stanwood Redi-Mix, Inc.

P.O. Box 69, Silvana WA 98287-0069

Ph. (360) 652-7777 Fax (360) 652-5685



ar@stanwoodredi-mix.com

Approved _____

Declined _____

By _____

Credit Application

For Business/ Commercial Accounts Only

Credit Limit Desired \$ _____

Date _____

Exact Name of Company	Telephone #	Fax #	Email Address
Physical Address of Business	City	State	Zip
Mailing Address	City	State	Zip
Bonding Agent	Telephone #	Bond #	
Sales Tax Exempt #	Note: STATE LAW REQUIRES WE HAVE RESELLERS CERTIFICATE ON FILE. PLEASE SUBMIT IF APPLICABLE. YOU WILL BE CHARGED SALES TAX IF WE DO NOT HAVE A COPY ON FILE.		
Federal Tax ID #	Contractor's License #	Type of Business	
Year Business Established	Legal Status of Business (circle one): Partnership Corporation Sole Proprietor Limited Liability Corporation		
How long have you been at your present address? If less than 2 years please list previous address			

Officer Information - Please List All Owners/ Partners and Their Titles

Name of Officer	Title	Social Security #	Address & Phone
Name of Officer	Title	Social Security #	Address & Phone
Name of Officer	Title	Social Security #	Address & Phone

Additional Information

Have you or your associates ever filed for bankruptcy, either personally or under another company name? _____ No _____ Yes	
Name of Officer and/ or Former Company	Date Filed
The statement above is true and correct	
Signature	Date

Financial Reference

Bank	Branch	Telephone
Street Address	City	State Zip
Bank Representative	Account Number(s)	

Credit References (List 4 Business References - 3 of which are not other concrete companies)

Name	Address	
Telephone #	Fax #	Email Address
Name	Address	
Telephone #	Fax #	Email Address
Name	Address	
Telephone #	Fax #	Email Address
Name	Address	
Telephone #	Fax #	Email Address

Business/ Commercial Application for Credit

The undersigned hereby makes this application for credit to Stanwood Redi-Mix, Inc. and in making this application the undersigned agrees to be bound by all the terms and conditions contained in this Credit Application, any documents referenced in this Credit Application, or any supplements.

All sales will be C.O.D. until notification of credit approval.

The undersigned agrees that all invoices and monthly statements are conclusive and accurate in all respects unless the undersigned notifies Stanwood Redi-Mix, Inc. in writing within 30 days of the date of invoice. The undersigned agrees that all invoices are payable by the 15th of the month following the date of purchase. The undersigned agrees to pay for all goods purchased regardless of whether the purchaser receives any payments due him for the installation of goods. The seller (Stanwood Redi-Mix, Inc) may apply payments received at its discretion. Invoices are to be paid in full. All invoices and statements will be paid by the due date or delinquency charges may be assessed at a rate of 1.5% per month or the highest rate allowed by law on any amount which becomes delinquent. I understand that Stanwood Redi-Mix, Inc. retains all lien rights and may exercise those rights should the account become delinquent. Additionally, the undersigned agrees to be responsible for all collection costs and attorney's fees in connection with any delinquent amount placed for collection in any manner. At the option of Stanwood Redi-Mix, Inc., the venue of any suit brought to collect this account may be had in Snohomish County Superior Court of the state of Washington. Any NSF or checks written on accounts will assess a \$40.00 NSF Fee.

Should credit availability be granted, all decisions with respect to the extension or continuation of credit shall be at the sole discretion of Stanwood Redi-Mix, Inc. If your application for credit is denied you have the right to a written statement of the reasons for the denial. To obtain a statement please contact Stanwood Redi-Mix in writing at: P. O. Box 69 Silvana WA 98287 within 60 days from the date you were notified of the decision.

The person(s) signing this application certify that all of the information contained in this application and any attachment or amendment is true, correct, and complete to the best of their information, knowledge. I/We agree to the above terms and conditions. You are hereby authorized to contact any or all of the above references and financial institution(s), as well as utilize outside credit reporting services to help establish a decision regarding credit worthiness. I understand that Stanwood Redi-Mix, Inc. is in no way obligated to grant me credit. Nor will any credit be granted without the authorized signature below.

Signature of Owner/ Officer/ Authorized Personnel

Date

Applicant's Full Name (Printed)

Title

Personal Guarantee:

I agree to the above terms and conditions stated and do assume personal liability for payment of said applicant's account. You are hereby authorized to utilize outside consumer credit reporting services to help establish a decision regarding my credit worthiness. It is understood that credit may not be granted without this personal guarantee.

Signature of Guarantor

Date

Guarantor's Full Name (Printed)

Social Security Number

Guarantor's Address _____

City _____ State _____ Zip _____

Telephone # _____ Email Address _____