

BULLSKIN STONE & LIME COMPANY, LLC

CREDIT APPLICATION AND AGREEMENT

BUSINESS CONTACT INFORMATION

CREDIT AMOUNT REQUESTED\$

Title:			
Company name:			
Phone:	Fax:	E-mail:	
Address:			
City:	State:	ZIP Code:	
Year business established:			
Sole proprietorship:	Partnership:	Corporation:	Other:

BUSINESS AND CREDIT INFORMATION

Primary business address:			
City:	State:	ZIP Code:	
Telephone:	Fax:	E-mail:	
Bank name:			
Bank address:	Phone:		
City:	State:	ZIP Code:	
Checking Account #			
Savings Account #			
Bonding Company:			
Tax Exempt? Y or N	Tax Exempt #	*Please Provide Sales Tax Exempt form	

BUSINESS/TRADE REFERENCES

Company name:			
Address:			
City:	State:	ZIP Code:	
Phone:	Fax:	E-mail:	
Company name:			
Address:			
City:	State:	ZIP Code:	
Phone:	Fax:	E-mail:	
Company name:			
Address:			
City:	State:	ZIP Code:	
Phone:	Fax:	E-mail:	
Company name:			
Address:			
City:	State:	ZIP Code:	
Phone:	Fax:	E-mail:	

AGREEMENT

1. All invoices are to be paid 30 days from the date of the invoice.
2. Claims arising from invoices must be made within seven working days.
3. By submitting this application, you authorize Bulskin Stone & Lime Company LLC to make inquiries into the banking and business/trade references that you have supplied.

SIGNATURES

Title:
Date:

Title:
Date: