

P

Customer #

Slsmn

Yes No
Permit

Status

Class

Credit Code

Do not write above this line; for office use only.

Personal Application for Credit

Builders Supply Co., Inc.
5701 S. 72nd St.
Omaha, NE 68127-3987
newaccount@builderssupplyco.com
Phone: 402-331-4500
Fax: 402-331-4688

Date: _____ Salesman: _____

Name and address for statement and invoice mailing

Name: _____

Address: _____

City: _____

State: _____

ZIP: _____

Social Security Number (Primary) _____

Date of Birth: _____

Email: _____

Cell Phone: _____

Social Security Number (Secondary) _____

Date of Birth: _____

Email: _____

Cell Phone: _____

Employer: _____ Position: _____
(Name of business if self-employed)

Address: _____ Phone: _____

Previous Employer: _____
(If less than five years)

Jobsite Address: _____

Project Type: _____ First Delivery Date: _____ Requested Credit Line: \$ _____

Purchase order required Only the following authorized purchaser(s) can charge: _____

(Any changes in authorized personnel must be made in writing to Builders Supply)

Have you ever taken bankruptcy? Y N If so, when: _____ Financial Statement Available: Y N

Have you ever received credit from this company before? Y N If so, under what name(s) was credit received? _____

Referred by: _____

Source of Payment Funds (if not a bank loan): _____

Bank References - Construction and Mortgage Loans
Please list the names and addresses of banks (and account numbers if known) on page 2.
Note: To expedite your credit application, be sure to sign the bank reference letter on page 2.

In consideration of the extension of credit by Builders Supply Co., Inc. to the undersigned, the undersigned hereby accepts and agrees to abide by all of the credit terms of Builders Supply Co., Inc. that appear on the invoice of Builders Supply Co., Inc. In addition, the undersigned specifically accepts the following terms:

1. To allow Builders Supply Co., Inc. to investigate the undersigned's credit records and references.
2. To furnish Builders Supply Co., Inc. any information that it may request concerning the undersigned's credit records.
3. To promptly notify Builders Supply Co., Inc., in writing, of any change in the undersigned's legal status, i.e., incorporation of business, termination of partnership, etc.
4. Our credit terms are: all invoices are due on the 30th of the month following the date of purchase; you may take a 2% discount if paid in full by the 10th, with cash or check. If paid by credit card or debit card, we cannot allow the 2% discount. We accept MasterCard, Visa, and Discover. In the event that an invoice is not paid within terms, a delinquency charge of 1 1/3% per month will be levied on the unpaid balance.

"I/we agree to pay for any costs associated with the collection of any past-due balancing, including, but not limited to, interest, attorney fees, court costs, and collection agency fees."

Signature Date Signature Date



**BUILDERS
SUPPLY CO**
Where quality costs less

5701 South 72nd Street
Omaha, NE 68127-0109

Office: (402) 331-4500
Fax: (402) 331-4688

www.buildersupplyco.com
info@buildersupplyco.com

LUMBER • WINDOWS • TRIM • HARDWARE • DECKING • SIDING • ROOFING
INSULATION • WALL PANELS • TRUSSES • CABINETS • COUNTERTOPS

Date _____

Dear Sir or Madam:

You may consider this as our open authorization and permission for Builders Supply Co., Inc. to contact my bank(s) we have named as our reference. This is for the purpose of being granted or maintaining an open line of credit with Builders Supply Co., Inc. in accordance with their Corporate Policy and Procedure.

This letter is also an introduction to the bank(s) listed below as our open authorization and permission to respond by providing Builders Supply Co., Inc. with their experiences with us.

Your credit history will be respected by Builders Supply Co., Inc. as confidential, thank you.

Signed by: _____

Account Owner(s): _____

Address: _____

City, State, ZIP: _____

Bank References

Savings Checking Loan

Name: _____
Address: _____
City & State: _____
Phone: _____ ZIP: _____
Account Number: _____
Officer to Contact: _____
Fax: _____
Email: _____

Savings Checking Loan

Name: _____
Address: _____
City & State: _____
Phone: _____ ZIP: _____
Account Number: _____
Officer to Contact: _____
Fax: _____
Email: _____

Bank References

Savings Checking Loan

Name: _____
Address: _____
City & State: _____
Phone: _____ ZIP: _____
Account Number: _____
Officer to Contact: _____
Fax: _____
Email: _____

Construction and Mortgage Loans

Name: _____
Address: _____
City & State: _____
Phone: _____ ZIP: _____
Account Number: _____
Officer to Contact: _____
Fax: _____
Email: _____

Complete, save, and email this form to newaccount@builderssupplyco.com.