



PO Box 1800 Gresham, OR 97030 PH#:503-858-8922 Fax#:503-620-5786

Credit Application

Company Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Cell: _____

Corporation [] Sole Proprietorship [] Partnership [] Years in Business: _____

Owner: _____ Address: _____

Owner: _____ Address: _____

Federal Tax ID #: _____

Bonding Company: _____ Bond #: _____

Contractor's License #: _____ Sales Tax #: _____

How do you want your invoices and statements sent to you (we prefer e-mail or fax)?

Fax (fax number and name of person to receive fax) _____

E-Mail (e-mail address to send invoices/statements) _____

Trade References (please provide 3 references)

Company Name: _____

Phone #: _____

Contact: _____

Fax # _____

Company Name: _____

Phone #: _____

Contact: _____

Fax # _____

Company Name: _____

Phone #: _____

Contact: _____

Fax # _____

AllSource Construction Supply Credit Application (Continued)

Bank Information

Bank: _____ Branch: _____

Address: _____

Contact: _____ Account #: _____ Phone#: _____

I/we hereby authorize AllSource Construction Supply to contact our bank to request credit information relating to our request for credit.

Name

Date

In consideration of extending me/us credit, I/we promise to pay my account in full by the tenth (10th) of the month following the purchase of materials. If payment is not made as agreed, I/we hereby agree to pay a reasonable attorney's fee for the collection thereof and a service charge equal to one and a half percent (1.5%) per month (or the maximum allowable charge if less) of the unpaid balance of my/our account for each month that the account remains unpaid in whole or in part. If this account is placed with a bonded collection agency for collection, I/we hereby acknowledge that you will be damaged thereby to the extent of the collection charge against you, and I/we hereby agree to pay, in addition to the unpaid balance due, an amount equal to the charge for said collection, not exceeding fifty percent (50%) of the unpaid balance due, as liquidated damages, and also a reasonable attorney's fee and costs of suit.

In consideration of your extending me credit, I/we acknowledge that you are relying upon the truth of the statements, both those that are preprinted and those that are completed by me/us or at my/our directions, in granting me/us any extension of credit, and that I/we have never filed a petition of bankruptcy and that I/we am/are not delinquent in any account with any firm or individual.

Signature _____ Title _____

Date: _____