

CREDIT APPLICATION

Date: _____

Firm Name _____

Address _____

Billing Address _____

Individual Ownership _____ Partnership _____ Corporation _____

Kind of Business _____

Amount of Credit Requested: _____ Contractor's License # _____

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BANK INFORMATION:

Bank Name _____ Phone # _____

Address _____

Account No./No's: _____ Contact Name: _____

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REFERENCES: List only those you buy on open account.

Name _____ Phone # _____

Address _____ Fax # _____

Name _____ Phone # _____

Address _____ Fax # _____

Name _____ Phone # _____

Address _____ Fax # _____

Name _____ Phone # _____

Address _____ Fax # _____

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Name of Officer/Owner/Partner: _____

Home Address: _____ Phone # _____

Social Security No.: _____ Driver's License No: _____

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Applicant hereby agrees to pay late payment charges of 1% per month on past due invoices. Applicant will also pay reasonable attorney's fees which Delamar Doors Inc. may suffer as a result of any manner of collection of any amount past due on the account.

The undersigned consents to Delamar Doors Inc. investigating undersigned's credit, its references, its credit worthiness for the purpose of extending credit, and for the undersigned's bank to release account information.

Signature _____ Title: _____ Date: _____

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I, the undersigned will guarantee the above account with my own personal assets.

Signature _____ Title: _____ Date: _____