



CREDIT DEPARTMENT

ATTN: CREDIT

(601) 264-2962
(601) 264-2559
(601) 296-4792 FAX

SALES- CREDIT APPLICATION

COMPANY NAME: _____ TEL () _____

BILL TO ADDRESS: _____

IS BUSINESS: Sole proprietorship: _____ Partnership _____ Corp: _____

BUYER'S NAME FOR LUMBER PURCHASES: _____ PLYWOOD: _____

NAMES & TITLES OF PRINCIPALS: PRESENT OWNERSHIP: _____ YEARS

CURRENT BALANCE SHEET ATTACHED: _____ WILL BE MAILED: _____

AMOUNT OF CREDIT REQUESTED: _____

Are your purchases sales tax exempt? Yes No **If yes, you must attach exemption certificate.**

PRIMARY MATERIAL SUPPLIER: _____ TEL() _____ FAX() _____

BANK: _____

(Name & Telephone Number)

(Officer's Name)

FOUR TRADE REFERENCES: (City, State, Telephone, Fax)

(1) _____

(2) _____

(3) _____

(4) _____

BANK AUTHORIZATION/ TERMS AND SIGNIATURE:

I hereby authorize the above named bank to disclose any and all information necessary for the completion of the Credit Application to Hood Industries. NOTE: THE "BANK AUTHORIZATION" IS NECESSARY IN ORDER FOR US TO OBTAIN THE NECESSARY INFORMATION FROM YOUR BANK.

I (We) represent, warrant, and confirm that all statements made by me (us) in this credit statement are correct and have been made by me (us) for the purpose of inducing the seller to extend this credit, and knowing that they will rely thereon. Reasonable attorneys fees will be assessed as well as other costs incurred for collection. Terms 1% 10, ADI Net 11. By my/our signature(s) I/we hereby authorize and give permission to Hood Industries, Inc. to run a full investigation of my/our credit history, including, but not limited to, obtaining consumer credit report.

SIGNED: _____ SIGNED: _____

TITLE: _____ TITLE: _____

DATE: _____ DATE: _____