

LUMBER ONE CO. – GEORGIA, INC.
755 WEST 20TH AVENUE
SHEFFIELD, ALABAMA 35660
Phone 256-383-7995
Fax 256-248-6318

CREDIT APPLICATION

FIRM NAME: _____

BILLING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHYSICAL ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____ FAX: _____

TYPE OF BUSINESS: () CORPORATION () PARTNERSHIP () PROPRIETORSHIP () OTHER _____

DATE ESTABLISHED: _____ FEDERAL ID#: _____ SALES TAX EXEMPTION# _____

OFFICERS OR PARTNERS

NAME:	TITLE:	HOME ADDRESS & PHONE:
_____	_____	_____
_____	_____	_____
_____	_____	_____

ACCOUNTS PAYABLE CONTACT: _____

BANK REFERENCE: _____ TELEPHONE: _____

LOAN OFFICER: _____ ACCOUNT #: _____

P. O. REQUIRED () YES () NO

REQUESTED AMOUNT OF CREDIT: _____

TRADE REFERENCES (PLEASE LIST 4 MAJOR REFERENCES WITH PHONE, FAX & CONTACT NAME):

1. _____
2. _____
3. _____
4. _____

THIS AGREEMENT MUST BE SIGNED BY THE OWNER OR AN OFFICER OF THE APPLICANT IN ORDER FOR IT TO BE APPROVED. APPLICANT CERTIFIES THAT ALL STATEMENTS AND INFORMATION CONTAINED IN THIS APPLICATION ARE TRUE, COMPLETE AND CORRECT AND ARE REPRESENTATIONS MADE TO BE RELIED UPON BY LUMBER ONE CO., INC. APPLICANT AUTHORIZES LUMBER ONE CO., INC. TO MAKE WHATEVER CREDIT INQUIRIES IT MAY REQUIRE CONCERNING THIS APPLICATION.

BY: _____ PLEASE PRINT NAME: _____

TITLES: _____ DATE: _____