Interstate + Lakeland Lumber Corporation

Credit Application Checklist and Explanations

The following items on the enclosed Charge Account Application and Credit Application must be completed before returning in the self-address envelope - no faxed copies accepted: All original copies must be returned.

General Information

C	omplete Company or Homeowner Name, address, phone number, voice and fax
P	rincipal/Owners 1 & 2 complete name and home address with phone number
If	Company provide Accounts Payable contact name and phone number and email address
E	mail address and Cell Phone number if you currently have them
Sales/Ord	ler Information
a	axable - every contractor is taxable - the only time when you will not pay sales tax is when the job you re working on is considered tax-exempt i.e. schools, Government offices, churches and other urchase order requirements
<u>Project/S</u>	hipping Address
	roject/Shipping Address - complete the address of project - if project is built for speculation nd resale include deed to property and copy of mortgage committal
P	hone number at construction site
lf	more than two projects are planned mark as general supply account
Authorize	ed to Charge List
	omplete list with all individuals (first and last name) authorized to charge on account - if names are not upplied we can not be responsible for unauthorized persons charging
Credit Inf	ormation -
	ew construction we require a copy of the deed for each lot and bank committal or other source of financing for ne project
Applicant	t Information

Request Credit Limit/per month - not for complete project - credit limits are based on your ability to pay in full every 30 days
Own your home - do you share the ownership with another party Yes or No
Commercial Transaction Yes or No
Declared Bankruptcy within the last 14 years
Date of Discharged
Judgement Entered
Fed ID#

Years in Business

Type of Company Organization - i.e. Partnership-LLC-Corp-Sole Prop

Interstate + Lakeland Lumber www.interstatelumber.com

184 South Water Street Greenwich, CT 06830 Tel 203-531-8050 / 914-939-2500 Fax 203-531-8689 46 Swamp Road Newtown, CT 06470 Tel 203-364-0074 Fax 203-364-0801

1 Turnage Lane Bethel, CT 06801 Tel 203-748-5629 Fax 203-748-8403 120 Selleck Street Stamford, CT 06902 Tel 203-348-3761 Fax 203-969-0777 1248 East Main Street Shrub Oak, NY 10588 Tel 914-245-5050 Fax 914-245-1451



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Trade References - Please complete all four forms enclosed and return back to us.

Please include name of at least one Lumber company that you are currently doing business with.

Terms of Sales (please do not alter terms) -

Name and title of person signing, include date signed

Personal Guaranty (please do not alter terms) -

Guarantor - must be principal owner - legal signature required and please print name clearly (If Corporation, application should be endorsed by two (2) officers)

SS# social sercurity number must be listed for guarantor's

Home address - please complete one more time

Witness and date

If Personal Guarantor lives in New York State and your home is owned jointly with another party they must also sign in the second location - Interstate will not accept account applications if this part is not completed. For companies doing land development and special housing please have more than one company member sign Personal Guaranty.

Banking Information form

		Bank Name - fax direct to manager of the branch you do business at
		Phone Number - branch where you bank
		Fax Number - for bank manager
		Business Name as listed with Bank
		Principal's Name as listed on account
		Business Address as listed on account
		Phone Number
1	\frown	Social Sercurity Number related to Bank Account
		Signature on signature card at bank
		Amount of credit requested - most banks want this information
7		Checking Account Number - Savings Account Number - Account Number for Loans

DO NOT FILL IN AREA FOR BANK USE ONLY

Thanking you in advance for your cooperation. Please call if you are in need of assistance. Please return all original forms.

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