



The Consumers BUILDERS SUPPLY CO.



TWO LOCATIONS TO SERVE YOUR NEEDS:

WASHINGTON AVE., LORAIN
NORTH RIDGE ROAD E., SHEFFIELD

INSTRUCTIONS

1. This application must be signed by the **owner**, if a sole proprietorship; by one of the **partners**, if a general partnership; by a **general partner**, if a limited partnership; or by an **officer** of the corporation, if a corporation. **If not signed by one of the foregoing, it must be accompanied by a letter authorizing such person to sign for and on behalf of the business entity which letter must be signed by one of the foregoing named persons.**
2. If a personal guarantee is required, guarantor must sign on personal guarantee line. Also, fill in individuals name and social security number in NOTE.
3. Complete all sections of credit application as fully as possible. Application may be faxed to speed up checking, but original signed application must be returned via mail.

CONTRACTOR CREDIT APPLICATION

I. BUSINESS NAME: _____

STREET ADDRESS: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ PHONE: () _____

FAX# _____ MOBILE #'S _____

E-MAIL _____ WEBSITE _____

II. HOW LONG IN BUSINESS? _____ FORMER NAMES: _____
CHECK BUSINESS STRUCTURE TYPE: (Fill in information under type checked)

A. _____ PROPRIETORSHIP/D.B.A.

Owner _____ Date of Birth _____

Social Security # _____ Spouse _____

Address _____

Own/Rent _____ Phone # _____

B. _____ PARTNERSHIP Tax I.D. # _____

List all Partners Name/Address _____

C. _____ CORPORATION Tax I.D. # _____

President _____

Vice-President _____

Secretary _____

Treasurer _____

Purchasing Agent _____

- OVER -

MAILING ADDRESS:
P.O. BOX 824
LORAIN, OHIO 44052-0824

PHONE: (440) 277-9305
ELYRIA, CUYAHOGA: (440) 236-6112

www.consumersbuilderssupply.com
FAX: (440) 277-6878

III. REFERENCES:

NAME 1. _____ 2. _____
 ADDRESS _____
 CITY/STATE/ZIP _____
 REPRESENTATIVE _____
 PHONE NUMBER _____

NAME 3. _____ 4. _____
 ADDRESS _____
 CITY/STATE/ZIP _____
 REPRESENTATIVE _____
 PHONE NUMBER _____

IV. BANK:

NAME _____ BRANCH _____

PHONE # _____ CONTACT PERSON _____
 Circle Type of Account(s) Checking, Savings, Mortgage, Construction Loan, Other _____

NAME _____ BRANCH _____

PHONE # _____ CONTACT PERSON _____
 Circle Type of Account(s) Checking, Savings, Mortgage, Construction Loan, Other _____

V. TERMS:

I/We submit the above information for consideration in the establishment of a credit account. If approved, I/We agree to pay according to their terms. It is understood that all accounts, which become past due, will be closed from charges and a service charge of 1.50% per month (18% annual) will be assessed. The minimum service charge is \$10.00. If any legal action is instituted to collect amounts due for purchases hereunder or to recover materials hereunder, the prevailing party shall be entitled to recover a reasonable attorney fee or collection service fee in addition to all other damages. I acknowledge that my signature hereon authorized the above named references, as well as any other references that Consumers Builders Supply deems valid to furnish credit information to them if requested.

PERSONAL GUARANTEE
_____ *
(Signature)

(Print Full Name)
*NOTE: By executing the Personal Guarantee above
_____ whose Social Security #
is _____ - _____ - _____, and address is _____
_____ understands and
agrees to be personally and individually liable to
Consumers Builders Supply for any past due amount
as defined in Paragraph V.

DATE: _____

(Company Name)

(Signature of authorized person) (See instruction #1 on pg. 1)

(Full Name of Person Signing Form. Please Print)

TYPE OF BUSINESS:

_____ FLATWORK	_____ REMODELING	_____ MASONRY
_____ SUBCONTRACTOR	_____ HOME BUILDER	_____ MASONRY/ FLATWORK
_____ INDIVIDUAL	_____ GENERAL CONTRACTOR	
_____ OTHER _____		

Approx. number of jobs each year: Build _____ Remodel _____ What percentage of jobs are: Commercial _____ % Residential _____ %

TAX-EXEMPT: _____ YES/NO (Send Exemption with Application)

PURCHASE ORDER REQUIRED? YES/NO _____ Approximate credit amount needed _____ per month