

Farmers Lumber Company

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CREDIT APPLICATION

Instructions: Please type or print in black or blue ink. Fill out all applicable questions. Personal applications fill out sections A, C, E, & F. Business applications fill out sections B, C, D, E, & F. All applications should be signed in section G. Any unsigned applications will not be considered. Farmers Lumber Company reserves the right to deny credit to any applicant on the basis of the information presented below.

Section A: Personal Accounts

Name _____ SSN _____ Date _____
Co-Applicant Name _____ SSN _____
Street Address _____ Credit Line Requested: \$ _____
Mailing Address _____
City _____ State _____ Zip _____ How Long At This Address? _____
Home Phone # _____ Cell Phone # _____ Work Phone # _____ Fax Phone # _____

Section B: Business Accounts

Business Name _____ Date _____
Parent Company _____ TIN _____
Street Address _____
Mailing Address _____
City _____ State _____ Zip _____ D-U-N-S Number _____
Business Contact _____
Business Phone # _____ Cell Phone # _____ Fax Phone # _____
Website: _____ Email Address: _____ Year Business Started: _____
Business Ownership: _____ Sole Ownership _____ Partnership _____ Corporation _____ P.O. Required? _____ Yes _____ No
Nature Of Business _____ Credit Line Requested: \$ _____
Sales Tax Exemption # _____ (A Signed Sales Tax Exemption Certificate Is Required)
Accounts Payable Contact: _____ Title: _____ Phone # _____

Section C: Person(s) Authorized To Charge To This Account

(OVER)

Section D: Business Owner(s) or Officer(s)

Name	Title	Address	Phone #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Section E: Credit or Trade References

Name	Address	Phone #
_____	_____	_____
_____	_____	_____
_____	_____	_____

Section F: Bank References

Name	Address	Phone #	Account #	Officer
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Section G: Personal Guarantee

I hereby certify that I have answered all the questions on this Application fully and truthfully. I authorize you to investigate my and my co-applicant's credit record and to check statements I've made either now or in the future for permissible purposes. I also authorize you to obtain a copy of my credit report as part of this investigation. If I do receive an extension of credit from you, I hereby authorize you to report to the extent permissible under applicable state and federal laws to others your credit experience with me. This application is your property and I understand you will keep it whether or not I receive credit. Furthermore, I am authorized, in my capacity, to bind my firm accordingly. I, the undersigned, do jointly and severally unconditionally, guarantee and promise to be held personally liable for all indebtedness accrued under this continuing agreement. I agree that all accounts or monies due you shall be due and payable at your place of business. I agree that all past due accounts, notes, or judgements shall automatically draw interest at the rate of 1½% per month of the unpaid balance. Terms of this account are Net 10th of the month following purchase. In case of default and referral to an attorney or collection agency, I agree to pay reasonable costs and attorney's fees.

Guarantor _____ Title _____
Applicant Signature

Guarantor _____ Title _____
Co-Applicant Signature