



Credit Application and Agreement

900 Mountain Home Road  
 Sinking Spring, PA 19608  
 Phone: 610-678-8814  
 Fax: 610-678-9498

Company Name/Address

Name of Business:		Monthly Credit Requested:
Address:		Phone #:
City:	State:	ZIP:
		Fax #:

Company Information

Nature of Business:		Date Business Began:
Legal Form of Business Organization: Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Proprietorship <input type="checkbox"/>		
Name of Owner:		Title:
Address (if different than above):		Email:
City:	State:	ZIP:
		Phone #:
Name of Secondary Company Contact (Owner/Officer):		Title:
Address (if different than above):		Email:
City:	State:	ZIP:
		Phone #:
Sales Tax Exemption Number: (if applicable, must also provide a valid sales tax exemption certificate)		

Billing Information

A/P Contact Name:	A/P Phone #:	A/P Fax #:	A/P Email:
Billing Address (if different than above):			
How would you like to receive your invoices? Mail <input type="checkbox"/> Fax <input type="checkbox"/> Email <input type="checkbox"/>		How would you like to receive your statements? Mail <input type="checkbox"/> Fax <input type="checkbox"/> Email <input type="checkbox"/>	

Bank References

Bank Name:	Address:	City:	State:	Zip:
Contact Name and Email:		Phone #:	Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loan <input type="checkbox"/> Acct #	
Bank Name:	Address:	City:	State:	Zip:
Contact Name and Email:		Phone #:	Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loan <input type="checkbox"/> Acct #	

**Trade References (include all building material suppliers)**

Company Name:		Address:		City:	State:	Zip:
Contact Name and Email:			Account #:	Phone #		
Current Balance Outstanding:	Credit Limit:	Account Opened Since:	Fax #:			
Company Name:		Address:		City:	State:	Zip:
Contact Name and Email:			Account #:	Phone #		
Current Balance Outstanding:	Credit Limit:	Account Opened Since:	Fax #:			
Company Name:		Address:		City:	State:	Zip:
Contact Name and Email:			Account #:	Phone #		
Current Balance Outstanding:	Credit Limit:	Account Opened Since:	Fax #:			

**Financial Information**

Company Total Assets:	Company Total Liabilities:	Annual Gross Sales Volume:
Has your company or its officers ever filed for bankruptcy?    Yes <input type="checkbox"/> No <input type="checkbox"/>		
If Yes, who and when?		
Is your company currently, or has it ever been subject to any litigation?    Yes    No <input type="checkbox"/>		
If Yes, explain:		

**Terms and Conditions**

All payments are due in accordance with the terms of sale as stated on invoice. In the event the Customer fails to make payment when due, Customer shall accrue a finance charge on the unpaid balance at a rate of 18% per annum (1.5% per month). Additionally, if it becomes necessary to pursue collections of delinquent balances, Customer shall be liable for any cost of collection, regardless of whether a lawsuit is initiated, including reasonable attorney fees in the event of a lawsuit, an appeal, and any post-judgement collections actions necessary to enforce any judgement rendered. Furthermore, Customer agrees to pay a \$35 service charge in the event that a check is returned.

I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended.

I have read the Terms and Conditions stated above, and agree to all of those Terms and Conditions.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

PERSONAL GUARANTEE

Intending to be legally bound, the Undersigned hereby unconditionally guarantees to Miller Builders' Supply Co., Inc. ("Company") prompt payment, when due, of Applicant's liabilities to the Company. This Guaranty is a continuing one and shall be effective and binding on the Undersigned for all liabilities incurred prior to written notice to the contrary being provided to the Company. The Applicant acknowledges that his Guaranty is given for good and valuable consideration, namely, the extension of credit by the Company to the Applicant, which the Applicant acknowledges to be a direct benefit to the Undersigned.

The Undersigned shall be liable for the full amount of the Applicant's liabilities to the Company. The liability of the Undersigned shall be absolute and unconditional and shall not be affected in any way by the lack of prior enforcement or delay in enforcement of any such rights or any delay in making demand on the Undersigned for performance or payment of the Undersigned's obligations hereunder.

\_\_\_\_\_  
Signature & Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spouse Signature (if married)

\_\_\_\_\_  
Date