

City Lumber Company, Inc.

114 Airways Blvd.

P.O. Box 1983, Jackson, TN 38302-1983

Phone (731) 427-9631

Fax (731) 256-1102

CREDIT APPLICATION AND AGREEMENT

Name: _____
Address: _____
City/State _____
Phone: _____ Fax: _____
Email: _____ Contact: _____
Cell: _____
SS#/TIN#: _____

Ownership of Business:

_____ Corporation _____ Partnership _____ LLC _____ Proprietorship

_____ Other (please explain) _____

BANK REFERENCE

Bank Name: _____
Address: _____
Phone: _____ Fax: _____
Email: _____ Contact: _____
Account #: _____

TRADE REFERENCES

1. Name _____
Address _____
Phone Number _____ Fax Number _____
2. Name _____
Address _____
Phone Number _____ Fax Number _____
3. Name _____
Address _____
Phone Number _____ Fax Number _____
4. Name _____
Address _____
Phone Number _____ Fax Number _____

The undersigned, an authorized agent for Buyer, understands that the foregoing statements are provided to induce City Lumber Company to extend open credit to Buyer and hereby certifies the above information to be true and correct to the best of his/her knowledge. The authorized agent further authorizes City Lumber Company to request a consumer credit report and to contact the references listed above. **All transactions with City Lumber Company are governed by the terms and conditions on the reverse of this credit application.**

Signature

Date: _____

Print Name and Title (Owner, Member, Partner, Officer, Authorized Agent)