

2760 North Great SW Pkwy, Grand Prairie, Texas 75050

Grand Prairie: Tele (972) 602-1777 Fax (972) 602-0224 Houston: Tele (713) 329-5870 Fax (713) 329-5871 Austin: Tele(512) 443-0777 Fax: (512) 443-0855 Louisiana: Tele (225) 271-3560 Fax (225) 271-3588

APPLICATION FOR CREDIT

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Please fill out completely	and legibly and f	ax to the loc	ation nearest yo	u or email to	credit@bra	zosfp.com
Business Name:						
Mailing Address:						
State: Zip:	Phone:		Alternate	e Phone:		
Cell:	Fax:		Email:			
Business Address:				City:		
State: Zip:	Federal	Federal Tax ID or SSN#:				
County Business is Located	d in:	Is the	Business in the C	City Limit: _	Yes	No
Type of Products Manufac	ctured or Type of	Business:				
Tax Status: Are you exemp	oted from Paying	State Tax:	YesNo If Yes	, Tax Exemp	t #	
(A Copy MUST be submitted	with application) Is	Business A: _	_ Corporation _	_ Partnership	oSole Pr	oprietorship
List of Officers and/Or Par	tners:			# of Emplo	oyees:	
Approximate Annual Sale	s \$\$:	Is Your	Business Locatio	n:Own	ed Lea	sed
Name of Landlord/Mortgo	agor:		P	none:		
Accounts Payables E-mail:			Owner or Prir	ncipal Name:	:	
Home Address:			Home Pho	one:		
CUSTOMER DATA:						
Do You Have A Forklift?	Yes	No	Delivery Hours:			
Can You Accept 18 Whee	elers?Yes _	No Spe	cial Instruction:			
BANK REFERENCES						
Name of Bank:		Address:				
City:						
Bank Officer:						
Account Number:						
CREDIT REFERENCES						
Company:	_	Address:				
City:			E-Mail:			
Contact:						
Company:						
City:	State:	Zip:	E-Mail: _			
Contact:	F	Phone:		Fax:		
Company:		Address: _				
City:	State:	Zip:	E-Mail:			
Contact:	F	Phone:		Fax:		

Brazos Forest Products, L.P.

Brazos Forest Acct#		Page 2
The above named firm hereby makes appropriate which is warranted to be true & correct. Undersigned is an authorized agent of the make binding agreements in just behalf; and must be notified in writing by certified mail. Information requested. (3) The applicant of Credit Reports or Personal Credit reports account balances are due when specified per month or up to the maximum legal limit due all cost of collection, including attorned materials purchased shall remain the propried completed. I (We) consent to have a may be requested. Brazos Forest Products L.	In Consideration thereof e Company/applicant a ny changes in ownership, I (2) The applicant author also authorizes Brazos Fore necessary to evaluate (; (5) Accounts older than it, whichever is lower; (6) In ey's Fees & court cost sho perty of "Brazos Forest Pr contact made with the al	fit is agreed & understood that (1) the and is duly empowered to enter into & Business Name or the business Structure, rizes the bank listed herein to release all est Products LP to request D&B Reports, worthiness to extend the credit.(4) All 30days will be assessed interest at 1.5% a the event of default of payment when all be paid by the applicant; and (7) All roducts L.P" until the funds transfer has bove references. Additional references
Signature:	Title:	Date:
Print Name:		
Please fill out follow	ing if the Method o	f Payment is Credit Card:
		cts, L.P to charge the following Credit card for the
		, Security code: Please keep my C/C
		es. Brazos Forest Products L.P. will not offer the early
		e account becomes more than 90days delinquent,
I/We herby authorize Brazos Forest Products	L.F. to charge the above	cara.
C'ava a la ma	T'H	Deller
Signature:	IITIe:	Date:
INDIVIDITAL PERSONAL	GURANTEE TO "RR	AZOS FOREST PRODUCT, L.P."
INDIVIDUALIERSONAL	. OURANIEL TO BRA	AZOS I OKLSI I KODUCI, L.I .
I,, re	Siding at	., to extending credit at my request to
		company") of which I am,
		nent at Brazos Forest Products, L.P. of any obligation
		Forest Products, L.P. on demand any sum which is
		the company whenever the company shall fail to
		g and irrevocable guaranty and indemnity for such
modification or renewal of the credit agree		onpayment and notice thereof and consent to any
Witnesses:	Them hereby godianneed	•
williesses.	Signatura	
	signature	
(Print Name)		
		(Print Name)
Social Security#.	S'Driver Licenso #:	(Print Name)
Social Security#: (Optional)	S'Driver License #:_ We do require the	(Print Name) exp: he DL# on file for all Credit Accounts)