



Credit Application

A. APPLICANT

Legal Business Name: _____
(List all Trade Names, DBA's; Divisions or Subsidiaries)

Street Address: _____ City: _____ State: _____ Zip: _____

Mailing: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ E-Mail: _____

Ship to Address: _____ Web Address: _____

Financial Contact _____ Phone: _____

Accounts Payable Contact _____ Phone: _____

Amount of Credit Requested: _____ Terms Requested: _____ How Long in Business: _____ Yrs

B. BUSINESS INFORMATION – Attach Financial Statements

Type of Business (Public/Private/LLC Partnership/Sub-Chapter S, etc): _____

Ownership:	Name of owner(s)	Percentage of Ownership
1.	_____	_____ %
2.	_____	_____ %
3.	_____	_____ %

C. BANKING INFORMATION

Bank _____ Branch _____ Phone _____

Address _____ City _____ State _____ Zip _____

Officer Contact _____ Acct. No. _____ Type of Acct. _____

Acct. No. _____ Type of Acct. _____

D. TAX INFORMATION

Federal Tax No./ SS# _____

Sales Tax Exemption Certificate Yes No (Attach Certificate)

Required: Customer is responsible for sales tax unless a Certificate for each applicable state is received.

VAT (if applicable): _____ Other Tax Identification: _____

I hereby authorize bank named above to release information requested for the purpose of obtaining and/or reviewing credit.

(Print Name)

Signature

Date

E. TRADE REFERENCES (Please fill out or attach separate sheet)

	<u>Name</u>	<u>Contact</u>	<u>Address</u>	<u>Phone #/Fax #</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

The preceding information is for the purpose of obtaining credit and is warranted to be true. I/We hereby authorize O’Neill Wood Resources (OWR) to investigate all references and customary credit information sources including consumer credit reporting repositories regarding my/our credit and financial responsibility for the purpose of obtaining credit and for periodic review for the purpose of maintaining the credit relationship.

TERMS: Terms of Sale including payment terms, are OWR Standard Terms and Conditions of Sale. OWR may notwithstanding of inconsistent item in any order or contract place credit restrictions, including holding shipments and/or canceling orders on past due accounts.

CHANGE OF OWNERSHIP: I/We understand that we must notify OWR in writing and by certified mail of any change in ownership, the name of the business or structure of the business under which credit is established.

In the event of default, and if this account is turned over to an agency and/or an attorney for collection, the undersigned agrees to pay all reasonable attorney fees, and/or costs of collection whether or not suit is filed.

APPLICANT’S SIGNATURE ATTESTS FINANCIAL RESPONSIBILITY, ABILITY AND WILLINGNESS TO PAY IN ACCORDANCE WITH ABOVE TERMS.

THE APPLICANT ACKNOWLEDGES AUTHORITY TO SIGN ON BEHALF OF THE FIRM.

Firm Name _____

By: _____ Title _____

By: _____ Title _____

Please return completed application to the Credit Department along with your company’s fiscal year-end financial statements.

Credit Department FAX # 308-381-1697 or email robbin@oneillwr.com

Products to be purchased: _____

For Internal Use Only

Account Number _____

Credit Representative _____

Terms _____

Sales Representative

