

DECOU LUMBER CO. CREDIT APPLICATION

P.O. BOX 698

ATASCADERO, CA 93422

PHONE (805) 466-2535 FAX (805) 466-6330

FOR OFFICE USE ONLY

DATE _____

DLNO _____

CODE _____

APPROVED NOT APPROVED

BY: _____

PLEASE CHECK THE TYPE OF ACCOUNT YOU ARE REQUESTING::

PERSONAL

BUSINESS- INDICATE TYPE BELOW

PARTNERSHIP

CONTRACTOR: LICENSE NO: _____

BONDING CO.. _____ BOND # _____

CORPORATION

PLEASE INDICATE IF YOU ARE

BUILDING A HOUSE

REMODELING

COMMERCIAL PROJECT

PLEASE THOROUGHLY FILL OUT THE INFORMATION THAT APPLIES.

APPLICANT:

CO-APPLICANT/ SPOUSE/ PARTNER:

NAME: _____

ADDRESS: _____

CITY/STATE: _____ ZIP: _____

SOCIAL SEC# _____ PHONE: _____

NAME: _____

ADDRESS: _____

CITY/STATE: _____ ZIP: _____

SOCIAL SEC# _____ PHONE: _____

EMPLOYMENT INFORMATION

RETIRED SELF EMPLOYED-PROOF OF INCOME

NEEDED IE - PAGE 1 OF PREV 1040

EMPLOYER: _____

ADDRESS: _____

CITY/STATE: _____ ZIP: _____

POSITION: _____

BEFORE TAX INCOME\$ _____ PER: _____

EMPLOYER'S PHONE _____

OTHER INCOME _____

RETIRED

SELF EMPLOYED-PROOF OF INCOME

NEEDED IE - PAGE 1 OF PREV 1040

EMPLOYER: _____

ADDRESS: _____

CITY/STATE: _____ ZIP: _____

POSITION: _____

BEFORE TAX INCOME\$ _____ PER: _____

EMPLOYER'S PHONE _____

OTHER INCOME _____

PURCHASE ORDERS REQUIRED? YES NO

FIRM NAME: _____

LOCAL ADDRESS (PHYSICAL): _____

CONTACT NAME: _____

LOCAL PHONE: _____

STATE OF INCORPORATION: _____

DIVISION OF: _____

SUBSIDIARY OF: _____

BILL TO ADDRESS: (IF DIFFERENT FROM LOCAL ADDRESS)

PRINCIPALS NAME

POSITION

ADDRESS

PHONE

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

AUTHORIZATIONS - PERSONS AUTHORIZED TO CHARGE ON THIS ACCOUNT

YOURSELF ONLY FAMILY ONLY

OTHERS- LIST FIRST AND LAST NAMES BELOW

1. _____ 4. _____ 7. _____

2. _____ 5. _____ 8. _____

3. _____ 6. _____ 9. _____

PROJECT INFORMATION
OWNER NAME AND ADDRESS

FOR MAJOR REMODEL OR NEW BUILDING:

CONTRACTOR NAME AND ADDRESS:

JOB ADDRESS

LENDER NAME AND ADDRESS

LOT# _____

TRACT# _____

BANKING INFORMATION

BANK ADDRESS PHONE CHECKING ACCT# SAVINGS ACCT# LOAN#

CONTACT:

BANK

CONTACT:

CREDIT REFERENCES- USE SEPARATE SHEET IF NECESSARY

NAME ADDRESS PHONE/FAX ACCOUNT #

ARE ANY OF YOUR PAYMENTS DELINQUENT? NO YES

HAVE YOU EVER DECLARED BANKRUPTCY? YES NO

ANTICIPATED MONTHLY CHARGES: 0-\$100 \$100-\$500 \$500-\$1000 \$1000-\$2000 \$2000-\$5000 \$5000- UP

TERMS OF ACCOUNT

TERMS: The total amount charged in each billing period, is due and payable upon receipt of your statement. You will have until the 10th of the month immediately following the billing period to pay your account in full without incurring a finance charge. All accounts which are not paid within the stated time period will have a finance charge added to the balance of the account at the rate of 1-1/2% per month (annual rate of 18%) until the account is paid in full. In addition, any account, which is not paid on time, will be closed until the entire balance plus the finance charges are paid in full.

I have read and understand the terms and conditions of the credit policies of DeCou Lumber Co. I have completed the required application supplying only information which is true and correct and understand that any information supplied is found to be incorrect or misleading my privilege of an account will be forfeited.

I hereby authorize DeCou Lumber Co. to verify the information on this credit application through data supplied by various credit reporting agencies. I authorize the banks and credit references listed on this application to supply, as courtesy, the information DeCou Lumber Company requires to verify my accounts and balances.

I agree to pay all amounts charged to my account according to the terms stated within this application. If I fail to do so, I agree to pay all finance charges and reasonable attorney fees and cost which may be incurred in collecting my account balance.

I/ WE MAKE THESE STATEMENTS UNDER PENALTY OR PERJURY IN _____ CALIFORNIA.

X _____
SIGNED DATE

X _____
SIGNED DATE

IF YOU WILL PURCHASE FOR RESALE PLEASE INCLUDE A RESALE CARD WITH THIS APPLICATION.