



Standard Lumber Co.
1912 Lehigh Avenue | Glenview, IL 60026

(847) 729-7800 Phone
(847) 729-8500 Fax
(847) 729-0261 Credit Fax

APPLICATION FOR CREDIT

COMPANY INFORMATION

Company Name | _____ Date | _____

Address | _____ Phone | _____

_____ Cell | _____

_____ Fax | _____

Type of Business | _____ Years in business | _____

Partnership Sole Owner Corp/Year _____

FEIN/SS# _____ Drivers License # _____

Amount of Credit Desired | _____

Tax Exempt | Yes No If yes, # _____
(please attach tax exempt letter/certificate)

Contact Person | _____ Title | _____

REFERENCES

(Must be material/supplier vendor only - personal references are not accepted)

Name | _____ Phone | _____

Address | _____ Fax | _____

Name | _____ Phone | _____

Address | _____ Fax | _____

Name | _____ Phone | _____

Address | _____ Fax | _____

Bank Name | _____ Phone | _____

Address | _____ Fax | _____

Signature | _____ Title | _____

TERMS: Net 30 -- Invoices older than 30 days shall incur interest charges of 1-1/2% per month = 18% per year.

DELINQUENT ACCOUNTS: Customer shall pay any cost or expense of any nature, including but not limited to attorney's fees, incurred by Standard Lumber Co. in collecting amounts due from and unpaid by customer.

JOBS GUARANTEED BY TITLE CO: Must submit a notarized Contractors Sworn Statement in advance.

FAX ATTN: MARY JEAN - (847) 729-0261



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CASH/C.O.D. CUSTOMER ACCOUNT

Company Name | _____ Phone | _____

Owner Name | _____

Address | _____

Business Phone | _____

Cell Phone | _____

Business Fax | _____

PAYMENT BY CHECK Yes No

Business Name / Check | _____

Personal Name / Check | _____

PAYMENT BY CREDIT CARD VISA MC AMEX DISCOVER

Credit Card Number | _____

Expiration Date - Last 3 No. | _____

Security Code (last 3 numbers on back of card - Amex has 4 numbers on front) | _____

Name on Credit Card | _____

Card Billing Address | _____

I.D. For Credit Card Check (Drivers License - State) | _____

Tax Exempt | Yes No If yes, # _____
(please attach tax exempt letter/certificate)

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