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| ChadronLumberlogo33.jpg personal Credit Application ChadronLumberlogo33.jpg |
| Date: |
| personal Contact Information |
| Name: |
| Primary Phone: |
| Alt. Phone: | Fax: | E-mail: |
| Address: |
| City: | State: | ZIP Code: |
| Credit Information |
| Requested Credit Limit: |
| Other People Authorized to Charge on Account: |
| Name: | Relation: |
| Name: | Relation: |
| Name: | Relation: |
| Other information: |
| references  |
| Company name: |
| Address: |
| City: | State: | ZIP Code: |
| Phone: | Fax: | E-mail: |
| Company name: |
| Address: |
| City: | State: | ZIP Code: |
| Phone: | Fax: | E-mail: |
| Agreement |
| 1. All invoices are to be paid by the 10th of the month following invoice date.
2. By submitting this application, you authorize Chadron Lumber Co. to make inquiries into the banking and business/trade references that you have supplied.
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| Signature |
| Print:Date: |