



3360 Red Bank Rd.  
 Cincinnati, OH 45227  
 Phone (513) 271-1500  
 Fax (513) 271-6145  
 www.hydeparklumber.com

Date \_\_\_\_\_

## Credit Application And Agreement

Applicant Name \_\_\_\_\_ Phone \_\_\_\_\_

Doing Business As \_\_\_\_\_ Fax \_\_\_\_\_

Street Address \_\_\_\_\_ Email Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ PO Box \_\_\_\_\_

SS# or Corporate Fed ID# \_\_\_\_\_ Tax Exempt ID# \_\_\_\_\_

Resale Permit# \_\_\_\_\_ (Please attach copies of Federal/State Tax Exemption Certificates)

Type of Business: Builder \_\_\_ Remodeler \_\_\_ Industrial \_\_\_ Manufacturer \_\_\_ Trade \_\_\_ Property Manager \_\_\_ Other \_\_\_

Anticipated Monthly High Credit Needed: \$ \_\_\_\_\_ Disbursing Office Location \_\_\_\_\_

Person to Contact for Payment \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Purchase Order Required? \_\_\_\_\_ P.O. Contact Person/Phone \_\_\_\_\_

**NOTE: SS# or minimum of three credit references (not utilities or credit cards) must be provided. Please include Fax number.**

### Local Supplier & Credit Reference

Firm Name	Address	Phone & Fax
1) _____	_____	_____
2) _____	_____	_____
3) _____	_____	_____
4) _____	_____	_____
5) _____	_____	_____

### Bank References

Checking/Operating Account Number \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone number \_\_\_\_\_ Officer of Bank \_\_\_\_\_

Loans? Yes \_\_\_\_\_ No \_\_\_\_\_

Please indicate your preference for receiving daily Invoices and monthly Statements:

- Email: Email Address \_\_\_\_\_
- Mail: Daily \_\_\_\_\_ Weekly \_\_\_\_\_ Monthly with Statement \_\_\_\_\_

### **Agreement and Payment Guarantee**

I/We fully understand that the above information is requested to verify the creditworthiness of this application and that The Hyde Park Lumber company will rely upon the accuracy of all the statements contained herein. I swear that the above information is true and accurate to the best of my knowledge

Date: \_\_\_\_\_ Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Name Printed: \_\_\_\_\_

The information provided above is true and accurate to the best of my knowledge and I understand that The Hyde Park Lumber Company is extending credit in this matter in specific reliance upon this information. In addition, I agree that the account shall be assessed a service charge of 1 ½% per month on any balance which remains unpaid for more than sixty (60) days. Furthermore, I personally shall indemnify The Hyde Park Lumber company and guarantee the payment, from my personal assets, of any and all invoices and their balance which become due and I hereby agree that The Hyde Park Lumber Company may look directly to me, personally, for payment without pursuing collection proceeding against any other person or business entity.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Name Printed: \_\_\_\_\_