



APPLICATION FOR CREDIT

PO BOX 1316 10125 HIGHWAY 6 WEST BATESVILLE, MS. 38606
Phone: 662-563-4574 Ext 265 Fax 662-578-9485 Email: marsha.williams@acibuildingsystems.com
ATTN: MARSHA WILLIAMS

DOLLAR AMOUNT OF ANTICIPATED PURCHASE \$ ACI SALES PERSON DATE

NAME OF FIRM Email address

DBA

MAILING ADDRESS (P O BOX) CITY STATE ZIP CODE PHONE

STREET ADDRESS CITY STATE ZIP CODE FAX

TAX STATUS: TAXABLE TAX RATE NON-TAXABLE (COPY OF CERTIFICATE REQUIRED)

BUSINESS CLASSIFICATION

CORPORATION STATE OF INCORPORATION YEAR OF INCORPORATION

PARTERSHIP PROPRIETORSHIP NUMBER OF YEARS IN BUSINESS

PRINCIPALS- (PRESIDENT, PROPRIETOR, PARTNERS)

NAME TITLE SOCIAL SECURITY NUMBER

NAME TITLE SOCIAL SECURITY NUMBER

PERSON TO CONTACT REGARDING ACCOUNTS PAYABLE:

BANK REFERENCE

NAME OF BANK PHONE FAX LOAN OFFICER

MAILING ADDRESS CITY STATE ZIP CODE

BONDING COMPANY (IF ANY)

BUSINESS TRADE REFERENCES

1) NAME CONTACT PERSON

PHONE FAX

2) NAME CONTACT PERSON

PHONE FAX

3) NAME CONTACT PERSON

PHONE FAX

GUARANTY AND TAX EXEMPTION CERTIFICATE (IF APPLICABLE) TO ATTENTION CREDIT MANAGER. CONFIDENTIAL
I (WE) UNDERSTAND THAT THE INFORMATION FURNISHED YOU ON THIS PAGE IS FOR IS FOR THE PURPOSE OF OBTAINING CREDIT FROM YOUR FIRM, THAT I
AM (WE ARE) AUTHORIZED, IN MY CAPACITY, TO BIND MY (OUR) FIRM ACCORDINGLY. THAT ALL ACCOUNTS OR MONIES DUE YOU SHALL BE DUE AND
PAYABLE AT YOUR PLACE OF BUSINESS. THAT ALL PAST DUE ACCOUNTS, NOTES OR JUDGEMENTS SHALL BE SUBJECT TO INTEREST AT THE
MAXIMUM RATE ALLOWED BY LAW. THAT I (WE) AUTHORIZE ACI BUILDING SYSTEMS, LLC, TO RELEASE INFORMATION PERTAINING TO MY ACCOUNT(S)
TO EACH AND ALL THIRD PARTIES UPON VERBAL OR WRITTEN REQUEST OF SUCH THIRD PARTIES. IN CONDERATION OF CREDIT BEING EXTENDED TO
THE ABOVE NAMED FIRM I PERSONALLY GUARANTEE ALL INDEBTEDNESS. HEREUNDER I FURTHER AGREE THAT THIS GURANTY IS AN ABSOLUTE,
COMPLETED AND CONTINUING ONE AND NO NOTICE OF THE INDEBTEDNESS OR ANY EXTENSION OF CREDIT ALREADY OR HEREAFTER CONTRACTED
BY OR EXTENDED NEED BE GIVEN. THE TERMS MAY BE REARRANGED, EXTENDED AND/OR RENEWED WITHOUT NOTICE TO ME THAT I WILL WITHIN FIVE
DAYS FROM DATE OF NOTICE THAT THE ACCOUNT IS PAST DUE, PAY THE AMOUNT DUE.

NAME