

CONFIDENTIAL CREDIT APPLICATION

To whom it may concern:

Thank you for your interest in opening an account with Allen & Allen Company.

Please download, complete and print the following forms to begin the process of opening an account with Allen & Allen Co. Once complete, please mail it to:

Allen & Allen Co. Attn: Credit 202 Culebra San Antonio, Texas 78201

*PLEASE NOTE: Faxed 210-733-5043 or e-mailed ar@lumberhardware.com credit applications are acceptable to begin processing, but an original signed document must be mailed to Allen & Allen Co. before a credit account can officially be opened. Please complete all requested information to avoid delays in processing your application.

If you have any questions regarding the application process found below, please contact the us at 210-733-9191 or at <u>ar@lumberhardware.com</u>.

Thank you,

The Allen & Allen Co. Team



CONFIDENTIAL CREDIT APPLICATION

202 Culebra Avenue.
P.O. Box 5140 – San Antonio, Texas 78201
210.733.9191 – 1.800.950.8579 – FAX 210.733.5043
ar@lumberhardware.com
www.lumberhardware.com

PLEASE COMPLETE BOTH SIDES

	Date:					
Billing Name or Trade Style:						
Billing Address:						
Physical Address:	(Street)	(City)	(State)	(9-Digit Zip Code)		
riiysicai Addiess.	(Street)	(City)	(State)	(9-Digit Zip Code)		
Prior address if above less th	an 2 years:					
		\$	Established			
(Type of Business)		(Monthly credit requested fro		(number of years)		
CREDIT REFERENCES (pl	-	-				
1						
2						
3						
4						
5. Bank Reference:			A/C #			
6. Employer (if no self emplo	oyed full time)		how long?			
7. Personal Reference:						
	ame)	(Address)		(Phone)		
This Application is for:	(please complete e	ither A or B below)				
A. Proprietorship of Par	tnership	B. Cor	poration			
Owner:		President	President:			
Home Address:		Home Ad	Home Address:			
Home Phone:		Home Ph	Home Phone:			
Social Security #:		Social Sec	Social Security #:			
TX DL #:		TX DL #:	TX DL #:			
Partner:		Vice Pres	Vice President:			
Home Address:		Home Ad	Home Address:			
Home Phone:		Home Ph	Home Phone:			
Social Security #:		Social Sec	Social Security #:			
TX DL #:		TX DL #:	TX DL #:			



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To Allen & Allen Co.

Signed by:

To aid in setting up an account for purchases made from Allen & Allen Co., I am (we are) attaching the most recent financial statement (if available) and listing the references on the reverse side of this account application.

I (we) authorize Allen & Allen Co. to obtain a credit report on the proprietor(s) of the company.

I (we) further understand that establishing this account is not an extension of credit and acknowledge that Allen & Allen Co. at its discretion, may refuse at any time to allow purchases be billed to this account.

In consideration of your agreement to open this account and bill for purchases made by me (us) or my firm, I (we) promise to pay to the order of Allen & Allen Co., at their office in San Antonio, Texas, all charges billed to this account and that these charges will be paid when due.* I (we) agree to pay a late charge equal to 1.5% interest per month on all past due balances, as well as all costs of collection, including attorney's fees and court costs incurred in collection of our account balance.

Title:

Signed by:	Title:
Date:	Witness:
	1% 10 th prox, net 15 th prox. Charges are past due on 16 th . e April 10 th less 1% on merchandise portion only, net amount due April 15 th .
guarantee all debts of the above entity to y	is for other than an individual, I (we) promise to pay and hereby personally ou in consideration of your agreement to establish an account with said entity ned by the payment terms contained herein. I (we) have read the foregoing as contained herein.
Signed:	Date:
Social Security #:	TX DL #:
Signed:	Date:
Social Security #:	TX DL#:



Texas Sales and Use Tax Exemption Certification

This certificate does not require a number to be valid.

Name of purchaser, firm or agency					
Address (Street & number, P.O. Box or Route number)		Phone (Area code and n	umber)		
City, State, ZIP code					
I, the purchaser named above, claim an exemption fro items described below or on the attached order or invo		se taxes (for the p	urchase of taxable		
Seller:					
Street address:	City, State, ZIP o	code:			
Description of items to be purchased or on the attached orc	der or invoice:				
Purchaser claims this exemption for the following reason:					
i dichaser dains this exemption for the following reason.					
I understand that I will be liable for payment of all state and the provisions of the Tax Code and/or all applicable law.	local sales or use taxes which	n may become due f	or failure to comply with		
I understand that it is a criminal offense to give an exemption certificate to the seller for taxable items that I know, at the time of purchase, will be used in a manner other than that expressed in this certificate, and depending on the amount of tax evaded, the offense may range from a Class C misdemeanor to a felony of the second degree.					
sign here	Title		Date		
Hele,					

NOTE: This certificate cannot be issued for the purchase, lease, or rental of a motor vehicle.

THIS CERTIFICATE DOES NOT REQUIRE A NUMBER TO BE VALID.

Sales and Use Tax "Exemption Numbers" or "Tax Exempt" Numbers do not exist.

This certificate should be furnished to the supplier. Do not send the completed certificate to the Comptroller of Public Accounts.



Texas Sales and Use Tax Resale Certificate

Name of purchaser, firm or agency as shown on permit		Phone (Area code and r	number)			
Address (Street & number, P.O. Box or Route number)						
City, State, ZIP code						
Texas Sales and Use Tax Permit Number (must contain 11 digits)						
Out-of-state retailer's registration number or Federal Taxpayers Registry (RFC) nu	ımber for retailers based in Mexico					
(Retailers based in Mexico must also provide a copy of their Mexico registration form to the seller.)						
I, the purchaser named above, claim the right to make a non-taxable purchase (for resale of the taxable items described below or on the attached order or invoice) from:						
Seller:						
Street address:						
City, State, ZIP code:						
Description of items to be purchased on the attached order or invoice:						
Description of the type of business activity generally engaged in or type of items normally sold by the purchaser:						
The taxable items described above, or on the attached order or invoice, will be resold, rented or leased by me within the geographical limits of the United States of America, its territories and possessions or within the geographical limits of the United Mexican States, in their present form or attached to other taxable items to be sold.						
I understand that if I make any use of the items other than retention, demonstration or display while holding them for sale, lease or rental, I must pay sales tax on the items at the time of use based upon either the purchase price or the fair market rental value for the period of time used.						
I understand that it is a criminal offense to give a resale certificate to the seller for taxable items that I know, at the time of purchase, are purchased for use rather than for the purpose of resale, lease or rental, and depending on the amount of tax evaded, the offense may range from a Class C misdemeanor to a felony of the second degree.						
sign here Purchaser	Title		Date			