



JLC Ready Mix Inc. Credit Application

Thank you for your interest in establishing a commercial credit account with us. Please complete this application in its entirety. All information will be kept confidential.

Company Information

Legal Company Name

DBA (Doing Business As) Name

Physical Street Address

City, State, Zip

Place

Mailing Street Address (if different)

City, State, Zip

Phone Number

Fax Number

Email Address

Website

Type of Business (Check one)

Sole Proprietorship: ☐

Partnership: ☐

Legal Company Name	DBA ☐ Doing Business As) Name
Corporation: ☐	LLC ☐
Other: ☐	
Federal Tax ID Number	Date Business Started
	Date

Principals/Owners

Please list all owners, partners, or corporate officers.

Name	Title	Home Address	Percent Ownership	Social Security Number ☐ Optional)
Person				
Person				

Credit Request

Requested Credit Limit	Estimated Monthly Purchases
Primary Purpose for Credit	
☐ Open Account	
☐ Other (Specify):	

Bank Reference

Bank Name	Contact Name
Account Number	Phone Number

Trade References

Please list three recent companies you have credit accounts with.

Company Name	Account Number	Phone Number
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Terms and Conditions

By signing below, the applicant acknowledges and agrees to the following terms and conditions:

1. **Payment Terms:** All invoices are due and payable within 21 days from the date of the invoice , unless otherwise agreed upon in writing.
2. **Interest:** A service charge of 1.5% per month (18% per annum) will be added to all past due balances.
3. **Warranties:** All goods are sold without express or implied warranty of merchantability or fitness for any particular purpose, except as may be stated on the invoice.
4. **Collection Costs:** The applicant agrees to pay all costs of collection, including reasonable attorney's fees, incurred by the creditor in the event of default.
5. **Authorization:** The undersigned authorizes  Person to investigate all information provided and to procure consumer reports/credit reports for the purpose of extending credit.

Applicant's Signature

I certify that the information provided in this application is true and correct.

Name of Authorized Representative [Print]		Title
Person		
Signature	Date	
		Date

Please return the completed application to:

Address for submission: JLC Ready Mix]

Michael Webb: Person mwebb@jlcreadymix.com

For any questions, please contact Mike Webb at 916: 416: 9017,
accounting@jlcreadymix.com

OFFICE USE ONLY

Credit Limit Approved	Date Approved	Approved By
Account Status	Notes	