



A Building Tradition since 1922
7180 Center St. Mentor, OH 44060

Business Credit Application

For Office Use Only:
Salesman:
Division:
Account #:
Credit Limit:
Approved:
Date Approved:

Company Name:

Billing Address:

City: State: Zip:

Business Address (if different from billing address):

Business Phone #: Fax #: Home Phone #:

Email Address: Cell Phone #:

Proprietorship Partnership Corporation - Date Inc. Federal I.D. #:

Type of Business: Years in Business: No. of Employees:

Purchase Orders Required? Y N

Account Payable Contact: Email Address:

Sales Tax Exempt? Y N (if tax exempt, attach certificate) Amount of Credit Desired?

Name/Title Social Security No. Home Address

President:

Vice President:

Sec'y./Controller:

PLEASE LIST ACCOUNT AUTHORIZED PURCHASERS BELOW:

Blank lines for listing account authorized purchasers.

List Credit References - Must include all information Phone No. Email Address Fax No.

Blank lines for listing credit references.

AGREEMENT AND TERMS:

STATEMENT: For the purpose of securing the extension of credit from Mentor Lumber & Supply Companies and/or any of its subsidiaries or affiliated companies, the undersigned represents and warrants that the statements made and information contained herein, and in the financial statement, if any, submitted herewith, are complete, correct, and true, with the intent that strict reliance be placed thereon as the basis for the extension and continuation of credit accommodations to the undersigned.
STATEMENT: The undersigned further agrees that notwithstanding the fact that this application has been executed in a corporate or representative capacity. Each signer hereof by such signature hereby assumes personal and individual responsibility for payment to Mentor Lumber & Supply Companies and/or any of its subsidiaries or affiliated companies, of all amounts due pursuant to such extension of credit, according to the invoice amount and credit terms stated thereon, said personal and individual responsibility being given in consideration of the extension of credit by Mentor Lumber & Supply Companies to the applicant. In the event of a default in the payment of any sums due from the applicant to Mentor Lumber & Supply Companies or any of its subsidiaries or affiliated companies, and notwithstanding the fact that this application has been executed in a corporate or representative capacity, each signer hereof by such signature hereby personally guarantees payment to Mentor Lumber & Supply Companies or any of its subsidiaries or affiliated companies at Mentor, Ohio all present and future balances of account due from said applicant, and further agrees to be responsible for any costs incurred in connection with any proceedings for the collection thereof. Applicant and any signer hereof notwithstanding the fact that this application has been executed in a corporate or representative capacity hereby agrees to pay the full amount of said purchases within terms. Purchase of material will indicate the acceptance of the terms and conditions that will be outlined in the credit establishment letter from the Manager of Financial Services. It is further agreed that the terms hereof shall take effect immediately upon the execution hereof and the extension of any credit to applicant. Also, I understand that a faxed application and its' signature is acceptable and considered as an original document.
STATEMENT: The undersigned further authorizes Mentor Lumber & Supply Companies to obtain credit reports both with respect to the applying entity or business and with respect to the undersigned personally and individually. The undersigned acknowledges that such credit reports may be considered consumer reports for purposes of the Fair Credit Reporting Act 15 U.S.C. § 1681 et seq., and that in making the determination of whether or not grant credit to the undersigned, Mentor Lumber & Supply Companies may rely upon the information contained in such credit reports. For a summary of consumer rights under the Fair Credit Report Act, please see 16 CFR Pt. 601 of App. A.
STATEMENT: A 2% per month service charge will be charged on all past due accounts.
STATEMENT: Purchases and/or deliveries are herewith authorized to be made without signature.
STATEMENT: I understand that this is a commercial account, either for business or governmental use, and that no charges will be made against such account for personal family, agricultural, or residential purposes, and that any such charges for personal family, agricultural or residential purposes will only be made by advising the Mentor Lumber & Supply Companies beforehand.

Signature: X Signature: X

Print Name & Date: Print Name & Date:

**CONSTRUCTION LOAN INFORMATION:**

NAME OF BANK: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Bank Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

JOBBSITE Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Loan Approved & Closed?  YES  NO

Is House Sold?  YES  NO Owners/Buyers Name: \_\_\_\_\_

Owners/Buyer's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**BANKING INFORMATION**

(IN THIS SECTION, PLEASE FILL IN THE "X" AREAS ONLY. BANK WILL COMPLETE THE REST)

Banking account's listed below are in the Name of:  \_\_\_\_\_

To Whom It May Concern:

Please Furnish the Mentor Lumber & Supply Companies with the information on my accounts listed. With my signature, I hereby authorize you to furnish the information below:

\_\_\_\_\_  
APPLICANTS SIGNATURE

\_\_\_\_\_  
APPLICANTS SIGNATURE

The following information is furnished in strict confidence in response to request. The accuracy of this information is not guaranteed.

Type of Account - Please circle (far left column) one: C - Checking; S - Savings; N - Now Account						
	Account Number	Name of Bank	Bank Phone #	Date Opened	Average Balance Previous Two Months	Current Balance
C S N	X	X	X			
C S N	X	X	X			

Does account have a non-sufficient fund history?  YES  NO

If yes, when, how many and amount owed? \_\_\_\_\_

Does account have overdraft privileges?  YES  NO If yes, what is the overdraft limit? \$ \_\_\_\_\_

Does applicant have other loans outstanding?  YES  NO If yes, amount owing: \$ \_\_\_\_\_

TERMS: \_\_\_\_\_  SECURED  UNSECURED

HIGH CREDIT: \$ \_\_\_\_\_ MANNER OF PAYMENT: \_\_\_\_\_

BY: \_\_\_\_\_ TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_

DATE RECEIVED: _____	DATE PROCESSED: _____
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