



Barry County

L U M B E R

Please attach:
 Copy of Driver's License
 Copy of Builders License (if applicable)
 Account Name should match Builders License Name exactly (if applicable)

(269) 945-3431 • FAX (269) 945-4020 • www.barrycountylumber.com

Legal Name of Corporation, Limited Liability Corporation (LLC)

Partnership or Proprietorship

Federal Tax ID _____ Date: _____

Sales Tax ID: _____ Phone Number: _____

Builders License #: _____ Cell Phone Number: _____

Driver's License #: _____ Fax Number: _____

Address: _____ Street _____ City _____ State _____ Zip _____

Email Address: _____

If this is a subsidiary
Name and address of parent company: _____

Type of Business:

____ Partnership How long in existence: _____

____ Individual Proprietorship If Corporation/LLC

____ Corporation State of Incorporation/Formation: _____

____ Limited Liability Corporation (LLC) Date Formed: _____

Principal's Name	Home Address	Social Security #	Drivers License #
A) _____	_____	_____	_____
B) _____	_____	_____	_____
C) _____	_____	_____	_____

Credit References:

1) Bank: Name: _____ Phone Number: _____
Address: _____ City: _____ State: _____ Zip: _____
Email or Fax #: _____

2) Supplier: Name: _____ Phone Number: _____
Address: _____ City: _____ State: _____ Zip: _____
Email or Fax #: _____

3) Supplier: Name: _____ Phone Number: _____
Address: _____ City: _____ State: _____ Zip: _____
Email or Fax #: _____

4) Supplier: Name: _____ Phone Number: _____
Address: _____ City: _____ State: _____ Zip: _____
Email or Fax #: _____

Briefly describe the nature of your business: _____

Briefly describe what materials you will be purchasing: _____

Amount of credit requested monthly: _____

(The initial credit limit may be changed from time to time by Barry County Lumber. The proof of the increased limit will be evident by allowing of the charging of materials. Failure to allow additional charges will be evidence that the credit limit increase has been denied.)

On projects where materials purchased from Barry County Lumber Co. will be used, has this company or any other filed a Notice of Commencement? _____

Names of persons authorized to charge on this account: _____

(NOTE: Charges will be accepted only from the above-listed persons; and change in authorized agents must be submitted in writing.)

I/We certify that the above information is true and correct. I/We agree to pay for all materials purchased within a certain month by the 10th of the month following their purchase. A time price differential of 1.5% per month (effective annual rate of 18%) which may be referenced as a "Finance Charge" on invoices or statements, will be added to all past due amounts. I/We further agree to pay all charges incurred by those authorized to charge on this account and agree that any additions or deletions will be made in writing. I/We hereby authorize Barry County Lumber Co. to investigate my/our credit record to the extent it deems necessary and to verify my/our references. I/We further authorize and instruct any person or consumer reporting agency to furnish Barry County Lumber Co. any information that it may have or obtain in response to such credit inquires.

Agreement To Pay Attorney Fees:

The applicant company promises to pay all costs of collection of all obligations of the company to Barry County Lumber Company of any type or nature, including but not limited to open account, contract and construction liens, which costs shall include but not be limited to the actual and reasonable attorney fees of Barry County Lumber Company incurred in connection with the collection of any past due amounts owed to Barry County Company whether by suit being instituted for such purpose or otherwise. In the event that suit is instituted, the amount of the said attorney fees shall be such that the court having jurisdiction thereof shall determine as being reasonable. In the event suit is instituted, then the amount owed to Barry County Lumber Company for attorney fees shall be actual collection cost including, but not limited to, court costs, legal fees, and filing fees including post judgment collection attorney fees.

Signed: _____ Date: _____
Printed Name: _____ Position: _____

Signed: _____ Date: _____
Printed Name: _____ Position: _____

(NOTE: If a partnership, all partners must sign. If a corporation, an authorized corporate officer must sign.)

Personal Guarantee for Business Accounts

The undersigned jointly and severally, personally guarantee the payments of any obligations of any type or nature, including but not limited to costs and attorneys incurred in collection of said obligations owed by said applicant and/or corporation. The undersigned do hereby, absolutely and unconditionally, as primary obligors, guarantee the full and prompt payment when due, whether due by acceleration, maturity, or otherwise, of any obligations of applicant. This guarantee is given in consideration of, and as an inducement for the extension of credit to said applicant and/or corporation.

Signed: _____ Date: _____

Signed (spouse if married): _____ Date: _____