



PO Box 86
Marble Falls, TX 78654
830.693.2228 Fax: 830-798-2226
[ll@colliermaterials.com](http://colliermaterials.com)

BUSINESS CREDIT APPLICATION

LEGAL COMPANY NAME: _____

Business Start Date _____ Credit Limit Desired: _____

Physical Address: _____

E-Mail Address for Invoices: _____

Phone Number: _____

A/P Contact Name: _____ A/P Phone Number: _____

Owner or Officer: _____ Owner or Officer Phone: _____

Federal ID# _____

Tax Status: ___ Taxable ___ Exempt Exemption/Resale Number: _____

If purchases are exempt from sales tax a signed exemption or resale certificate must be attached.

Purchase Order Numbers Required? ___ Yes ___ No

List any Specific purchase requirements. _____

TRADE REFERENCES:

Supplier Name: _____ Phone: _____

E-Mail: _____

Supplier Name: _____ Phone: _____

E-Mail: _____

Supplier Name: _____ Phone: _____

E-Mail: _____

I, _____ residing at _____ for and in consideration of Collier Materials, Inc. (CMI) extending credit to the entity named above (ENTITY), hereby personally guarantee to CMI the payment of any obligation of the ENTITY and I agree to bind myself to pay upon demand, any sum which may be due and remains unpaid after the due date. This guaranty shall be a continuing and irrevocable guaranty and indemnity for such indebtedness of the ENTITY. I do hereby waive notice of default, nonpayment and notice thereof and consent to any modification or renewal of the credit agreement hereby guaranteed.

I further certify the ENTITY is solvent and capable of meeting its obligations hereunder and that all information provided to Seller is true, accurate and complete. All such information has been submitted for the purpose of obtaining credit.

ACCOUNTS PLACED IN COLLECTIONS ARE LIABLE FOR ALL ATTORNEY FEES AND COLLECTION CHARGES.

Authorized Signature: _____

Print Name: _____ **Date** _____

All invoices are due and payable 30 days after DELIVERY.

After 30 days an 18% APR finance fee will apply.

3% Credit Card Fee on All Credit Card Charges