



SERVING NORTH LOUISIANA & SOUTH ARKANSAS SINCE 1945



PHONE (318) 322-4444
WATS (800) 732-3969
FAX (318) 322-7299

POST OFFICE BOX 4420
3250 ARMAND STREET
MONROE, LOUISIANA 71211

APPLICATION FOR OPEN CREDIT

GENERAL

DATE

COMPANY/INDIVIDUAL NAME:

OFFICE/HOME NO. CELL NO. FAX NO.

MAILING ADDRESS:

STREET ADDRESS: CITY STATE ZIP

TYPE OF CUSTOMER: [] INDIVIDUAL [] PARTNERSHIP [] CORPORATION Years In Business

FED ID # or Soc. Sec # Amount of Credit Requested: \$

A certification of exemption must be received for each tax-exempt project.

FINANCIAL

Name of Bank: Account #:

Name on account:

Bank Address:

City: State: Zip:

Bank Officer / Representative: Bank Phone #:

OWNER OR OFFICERS

NAME POSITION ADDRESS
NAME POSITION ADDRESS
NAME POSITION ADDRESS

TRADE REFERENCES

Name: Acct. #:

Phone: Fax. #:

Trade Reference (continued)

Name: _____

Acct. #: _____

Phone: _____

Fax #: _____

Name: _____

Acct. #: _____

Phone: _____

Fax #: _____

The following are terms of sale:

The undersigned submits this application subject to the terms and agrees to and understands the content of the statement below:

1. All payments are to be first applied to any outstanding balance of the account.
2. Applicant understands terms of the sale as net 30 days from invoice date.
3. Invoices not paid within 45 days of invoice date are charged a finance charge of 18% per annum, and will be collected.
4. Should it become necessary for applicant's account to be turned over to an attorney or collection agency for collection, applicant agrees to pay collection fees incurred by such action.
5. Applicant understands they may be notified of account balances not paid over 45 days.
6. Applicant understands they may be notified if account exceeds approved limit. Applicant may be asked to secure any excess amounts.
7. Applicant has received a copy of the return policy and agrees to terms stated within said policy.

In consideration of Century Ready Mix Corporation selling to the customer on open account, the undersigned personally guarantees this account will be obligated for payment under terms stated above.

X

Signature of owner or officer

Date

Please print name