



LA GRANGE

MATERIALS, INC.

BUILDING MATERIAL
CONCRETE PRODUCTS
MASONRY PRODUCTS

OFFICE USE ONLY	
APPROVED BY:	_____
LIMIT _____	<input type="checkbox"/> C.O.D.

APPLICATION FOR CREDIT

FULL NAME OF COMPANY _____			
SHIPPING ADDRESS _____	CITY _____	STATE _____	ZIP _____
MAILING ADDRESS _____	CITY _____	STATE _____	ZIP _____ (AREA CODE) PHONE# _____
TYPE OF BUSINESS _____	HOW LONG IN BUSINESS _____	PARENT COMPANY NAME _____	
PRINCIPAL OFFICERS, PARTNERS OR OWNERS _____	TITLE _____	RESIDENCE ADDRESS _____	
_____	_____	_____	
_____	_____	_____	

PLEASE COMPLETE IN FULL

BANK	ACCOUNT NUMBER	ADDRESS	TELEPHONE
_____	_____	_____	_____

REFERENCES-TRADE	STREET ADDRESS	CITY	STATE	ZIP CODE	(AREA CODE) PHONE#
1. _____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____

Upon request will you furnish most recent financial statement? Yes ___ No ___ Open Account Credit Limit requested\$ _____

BILLING INFORMATION Who to contact on Questions on Billing _____
Name Phone

Will a Purchase Order be used? _____ Resale Number Used _____

In consideration of **LaGrange Materials, Inc.** extending credit to the customer, I, the customer, agree to the following terms:

TERMS: Tickets dated one month only qualify for a 2% discount if paid by the 10th of the following month, assuming no prior tickets remain unpaid. All invoices unpaid at the end of the following month are SUBJECT TO A 1½% FINANCE CHARGE, which is an ANNUAL RATE OF 18%. Accounts 60 days Past Due will be closed.

In the event **LaGrange Materials, Inc.** must take legal action to collect this account, customer agrees to pay all reasonable attorney's fees, court costs, sheriff's fees and bond costs incurred by **LaGrange Materials, Inc.**

I certify that all the information on this form is correct, and that we fully understand your credit terms and agree to the proper payment in consideration of extended credit.

Date _____ (signed) _____
(title) _____