

**APPLICATION FOR CREDIT**

Name of Firm _____			
Address _____			Years at this address _____
City _____	State _____	Zip _____	Phone _____

HEREBY applies for credit in accordance with the terms and conditions of:

**Winnisquam Wood Products, Inc.**  
**40 Tilton Road**  
**P.O. Box 221**  
**Tilton, NH 03276**

Gary Strzepek  
 Credit Manager

2% 10 days, NET 30  
 Credit Terms

The following information must be provided. It will be held in the strictest of confidence.

Corporation <input type="checkbox"/> Check here if incorporated within the past 12 months <input type="checkbox"/> Partnership <input type="checkbox"/> Individual <input type="checkbox"/>			
1)	_____	_____	_____
	name(s) of principal(s) complete address zip		phone
2)	_____	_____	_____
3)	_____	_____	_____
4)	_____	_____	_____

\_\_\_\_\_ bank address

\_\_\_\_\_ bank officer or department phone

<b>REFERENCES:</b> list suppliers; name, address, fax & telephone number	
1)	_____
2)	_____
3)	_____
4)	_____

Check here if cash sales are okay until credit is approved

**WINNISQUAM WOOD PRODUCTS, INC.**

Person to contact for payment information:

\_\_\_\_\_  
Name Address Phone

**AUTHORIZATION:** The undersigned authorizes any credit investigation as needed and hereby indemnify the above company from any liability resulting from their credit survey. It is also acknowledged and agreed that this company may report this accounts receivable information to various consumer and commercial credit agencies.

**TERMS:** Accounts are due NET 30 DAYS from date of invoice. Accounts not paid within 30 DAYS will be considered DELINQUENT and this company shall have the right to close account. All delinquent accounts will be assessed a FINANCE CHARGE of 1.5% per month, (18% per annum). In addition, a LATE FEE of 5% of the unpaid balance will be charged for the cost of additional handling. Any check returned due to insufficient funds will incur a \$25.00 charge.

**AGREEMENT:** I/We certify the above-furnished information to be true and complete.  
I/We have authorization to make this request for credit.  
I/We are financially able to meet any commitments we make and will pay all invoices according to the above stated terms.  
I/We further agree, in the event any balance is past due and the account is placed in the hands of an attorney for collection, the I/We agree to pay all costs and expenses of such action together with reasonable attorney's fees.

\_\_\_\_\_  
Applicant Title Witness

\_\_\_\_\_  
Applicant Title Witness

**GUARANTEE:** For value received the receipt of which is hereby acknowledged, the undersigned, jointly and severally guarantees the prompt payment of all sums due by the above named applicant including reasonable attorney's fees and costs of collection in the event of a default. The undersigned agrees to remain bound on this guarantee notwithstanding any extension, indulgence of changes in the terms of payment made with this application. Waiving securityship defenses generally, the undersigned obligation to be of a principal in event of default, without obligation to first exhaust remedies against the applicant or other collateral. No termination of this agreement shall be effective, except that sent by registered mail naming a date after the date of receipt of a notice. No termination shall affect the liability of the undersigned with the respect to any credit extended prior to termination date.

Signed and sealed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Guarantor Signature Address

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Please do not write in the space below  
\_\_\_\_\_

\_\_\_\_\_  
References checked by

\_\_\_\_\_  
Date

\_\_\_\_\_  
Credit approved by

\_\_\_\_\_  
Credit refused by