



MADISON WOOD PRESERVERS, INC.
216 OAK PARK RD. MADISON, VA 22727
(540-948-6801)
APPLICATION FOR CREDIT

Name _____	Telephone _____	Date _____
DBA _____	Street Address _____	PO Box _____
City _____	County _____	State _____ Zip Code _____
Nature of Business _____	No. of Years _____	

<p style="text-align: center;">Corporation (List Officers Below)</p> President: _____ Address: _____ Vice Pres: _____ Address: _____ Registered Agent: _____ Address: _____	<p style="text-align: center;">Partnership (List Partners Below)</p> 1. Partner: _____ Address: _____ 2. Partner: _____ Address: _____ 3. Partner: _____ Address: _____
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Invoice Method Preferred (please circle one)

Email
 Fax
 Mail (USPS)

AP Contact _____
 AP Contact Email _____
 AP Contact Fax _____

Building Supply References & Phone Numbers (This information is required)

1	Tel.	Fax/Email
2	Tel.	Fax/Email
3	Tel.	Fax/Email
4	Tel.	Fax/Email

D&B DUNS (If available):

Name of Bank: _____
 Person to Contact: _____

Address: _____
 Tel: _____
 Fax/Email: _____

Statement: In consideration of credit being extended by Madison Wood Preservers, Inc., to me/us/it, I and/or we certify the truthfulness and veracity of the information appearing above, and I and/or we guarantee and bind ourselves to the faithful payment of all amounts now owed or to be Incurred, by me or either of us, or any other person, firm or corporation for our benefits. ****If credit is extended to a corporation in which we or either of us or I am an officer, or in which an interest exist I and/or we will personally faithfully guarantee the payment of all credit extended to said corporation.**

Statement: In the event this account is placed in the hands of an attorney for collection or suit instituted to collect same or any portion thereof, I and/or we agree and promise to pay all attorney's fees.

Billing: Terms given on invoices. Each month if your account is not within terms as stated on invoice, a finance charge will be added in the amount of 2% calculated on the past due amount.

(NOTE: IT IS IMPORTANT THAT YOU THOROUGHLY READ BEFORE SIGNING)

<p>Full Legal Name of Company:</p> _____ _____ _____	<p>Signature of Officer or Owner: _____</p> <p>Printed Name from Above: _____</p> <p>**Guarantor(s) Sign: _____</p> <p>Print: _____</p>
<p>Date: _____</p>	

(For Office Use Only)

Credit Limit: _____
 Terms: _____
 Approved by: _____