## **APPLICATION FOR CREDIT**

## **HARRY'S LUMBER COMPANY**

6220 N. Northwest Highway Chicago, IL 60631 www.harryslumber.com

Phone 773-631-6568 Fax 773-631-6593

COMPANY NAME		EMAIL	\$Amount of Credit requested	
ADDRESS	CITY STAT	E ZIP	PHONE	
People Authorized to Charge of	n Account			
TYPE OF OWNERSHIP (Che	ck One) [ ] CORPORATION	[ ] PARTNERSHIP	[ ] INDIVIDUAL	
NAME (S) PRINCIPLE OWN	ER (S)			
NAME OF BANK	Address	Phone	Account #	
	REFERENCES (Firms n	now extending credit)		
1. NAME	Contact Name	ACCOUNT	# Credit Limit	
ADDRESS	CITY STATE ZIP	PHONE #	Fax#	
2. NAME	Contact Name	ACCOUNT	# Credit Limit	
ADDRESS	CITY STATE ZIP	PHONE#	Fax#	
3. NAME	Contact Name	ACCOUNT	# Credit Limit	
ADDRESS	CITY STATE ZIP	PHONE#	Fax#	
use of your credit department of net 10. All monthly charges when due, or upon demand, the	ertify that the information on this form only and will be held in the strictest con are due by the 10th of the following me full amount of any indebtedness owire credit plus reasonable attorney fees and	nfidence. If credit application is appoint the undersigned personally ag to Harrys Lumber Company by	oproved, I agree to your terms guarantees and agrees to pay	
DATE SIG	NED TITLE	TITLE (Must be signature of Owner or Controller)		