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	EMA	IL	\$Amount of Credit requested
ADDRESS	CITY STATE ZIP		PHONE
People Authorized to Charge on Acc	ount		
TYPE OF OWNERSHIP (Check On	e) []CORPORATION []PA	ARTNERSHIP	[] INDIVIDUAL
NAME (S) PRINCIPLE OWNER (S)		
NAME OF BANK	Address REFERENCES (Firms now exten	Phone ding credit)	Account #
1. NAME	Contact Name	ACCOUNT #	Credit Limit
ADDRESS	CITY STATE ZIP	PHONE #	Email
2. NAME	Contact Name	ACCOUNT #	Credit Limit
ADDRESS	CITY STATE ZIP	PHONE#	Email
3. NAME	Contact Name	ACCOUNT #	Credit Limit
ADDRESS	CITY STATE ZIP	PHONE#	Email

I hereby apply for credit and certify that the information on this form is correct. Our understanding is that this information is for the use of your credit department only and will be held in the strictest confidence. If credit application is approved, I agree to your terms of net 10. All monthly charges are due by the 10th of the following month. The undersigned personally guarantees and agrees to pay when due, or upon demand, the full amount of any indebtedness owing to Harrys Lumber Company by the Company (or individual) in connection with such sales on credit plus reasonable attorney fees and collection costs

DATE	SIGNED	TITLE (Must be signature of Owner or Controller)
DAIL	SIGNED	TTLL (What be signature of Owner of Controller)