

**KIRSCH BUILDERS SUPPLY
155 INDUSTRY AVENUE
FRANKFORT, IL 60423
815-469-3200 FAX 815-469-4768
APPLICATION FOR CREDIT**

BUSINESS NAME: _____

BUSINESS PHONE: _____

BUSINESS ADDRESS: _____

FAX #: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

OWNER NAME: _____

HOME ADDRESS: _____

HOME PHONE: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

CELL PHONE: _____

ALTERNATE CONTACT NAME: _____

E-MAIL: _____

BANK NAME: _____

PHONE: _____

ADDRESS: _____

CONTACT: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

CREDIT REQUESTED \$\$: _____

REFERENCES:

1.) _____

2.) _____

3.) _____

4.) _____

I (WE) CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT, AND WILL COMPLY WITH THE FOLLOWING TERMS:

PURCHASER AGREES TO AND SHALL PAY ALL OF SUPPLIER'S COSTS OF COLLECTION INCLUDING LEGAL FEES. NET INVOICES ARE DUE & PAYABLE 30 DAYS AFTER DATE OF INVOICE. A FINANCE CHARGE 1 1/2% PER MONTH.

DATE

SIGNED

SIGNED

TITLE

TITLE

OFFICE USE ONLY

REFERENCES COMPLETE AND ATTACHED

CUSTOMER I.D. NUMBER _____

APPROVED BY

DATE

CREDIT AMOUNT APPROVED \$\$\$ _____