

ISLAND BUILDING SUPPLY, INC.

620 UNION AVE. HOLTSVILLE, NY 11742

TEL: (631)758-2600 FAX: (631)758-2639

CREDIT APPLICATION

ACCOUNT

NAME: _____ TEL: _____ FAX: _____

ADDRESS: _____

() CORPORATION () PARTNERSHIP () INDIVIDUAL DATE ESTABLISHED: _____

TYPE OF BUSINESS: _____

SALES TAX EXEMPT N°: _____ ATTACH YOUR RESALE AND/OR EXEMPT CERTIFICATE

PRINCIPALS

| NAME / TITLE / SSN | ADDRESS | TEL |
|--------------------|---------|-------|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |

BANKING

BANK NAME: _____ ACCOUNT #: _____

BANK ADDRESS: _____

OFFICER: _____ TEL: _____ FAX: _____

TRADE REFERENCES – MUST BE SUPPLIERS

| NAME | TEL | FAX |
|----------|-------|-------|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |

AGREEMENT

I agree to pay my account in full, upon receipt of monthly statements. Any account not paid within terms will be considered overdue and 1.5% finance charge (18% APR), will be added to said account. In order to induce you to sell merchandise the undersigned jointly and severally personally guarantee the full and prompt payment including all finance charges, collection costs and attorney's fees, which at any time may be incurred by said corporation or its representatives to you, and waive any presentment, demand, protest, and any other notice regarding this guarantee of payment. I (we) give permission from the principles and/or owner for you to obtain corp./personal, credit reports. MUST BE SIGNED TWICE

PRINT NAME

SIGNATURE INDIVIDUAL

DATE

PRINT NAME & TITLE

SIGNATURE WITH TITLE

SSN