

MJB WOOD GROUP, INC

222 W. LAS COLINAS BLVD.

SUITE 1300

IRVING, TX 75039

PHONE (972) 401-0005

FAX (972) 409-9949

APPLICATION FOR CREDIT

Date: _____

Please answer all questions.

Credit information given by: _____ MJB Salesperson: _____

Firm Name Phone			
_____ (____) _____ - _____			
Mailing Address/P.O. Box	City	State	Zip
_____	_____	_____	_____
Street Address	City	State	Zip
_____	_____	_____	_____
Previous address if less than 5 years at address above			Fax
_____ (____) _____ - _____			

Type of Business	Date Started	Annual Sales
_____	____/____/____	\$ _____
Subsidiary or Affiliate of	Location	
_____	_____	
Former Business	Location	
_____	_____	

Check One: Individual Partnership Corporation

DUNS Number: _____

A. Individuals and Partnerships complete the following:

Name	Spouse's Name
(1) _____	_____
Home Address	State Zip
_____ City	_____
Social Security Number	Drivers License Number
_____	_____
Name	Spouse's Name
(2) _____	_____
Home Address	State Zip
_____ City	_____
Social Security Number	Drivers License Number
_____	_____

Name _____ Spouse's Name _____
 (3) _____
 Home Address _____ City _____ State _____ Zip _____
 Social Security Number _____ Drivers License Number _____

B. Corporations complete the following:

Name of President _____
 Name of Vice President(s) _____
 Name of Secretary _____
 Address of Principal's Office _____
 City _____ State _____ Zip _____
 Federal Tax Number _____ Date Incorporated _____, 20__

Purchase Order Required: Yes No
 Job Number Required: Yes No
 Taxable: Yes No Tax Number _____

Estimated Monthly Volume \$ _____

	Trade References		
	<u>Name</u>	<u>Address</u>	<u>Phone</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

Name of Bank _____ Officer _____
 Address _____ City _____ State _____ Zip _____
 Account Number(s) _____ Phone No. _____ Fax No. _____

Extra sheets should be attached when necessary to disclose any material information where space provided is not sufficient.

CREDIT TERMS AND POLICY

Everything stated in this application is true and correct to the best of my knowledge. It is understood you will retain this application whether or not it is approved.

You are authorized to check our credit as necessary through our trade references, bank reference and/or a credit reporting agency to obtain answers about our credit experience. In consideration of such extension of credit it

is understood all invoices shall be due and payable in accordance with the terms set forth on the TERMS & CONDITIONS OF QUOTATIONS AND SALES, which will be sent with the new customer information provided after credit approval.

Customer shall provide a current Sales and Use Tax Resale Certificate for all states to which material will be shipped by MJB to customer. Failure to provide a certificate will result a sales tax charge on all orders.

In the event of non-payment and the institution of legal proceedings, Customer agrees to bear the expense of collection, including reasonable attorney's fees, to the extent allowable by law.

All parties further agree that in the event legal action becomes necessary the same will be filed and tried in Dallas County, Texas.

IMPORTANT – MUST BE SIGNED & DATED BY OWNER IF PROPRIETORSHIP, PRESIDENT OR OFFICER IF A CORPORATION, OR GENERAL PARTNERS IN CASE OF PARTNERSHIP. BY SIGNING YOU AGREE TO AND ACKNOWLEDGE OUR TERMS AND CONDITIONS.

Name of Firm

Signature

Title

Date

Print Name

*******IF TAX EXEMPT, PLEASE SEND SALES AND USE TAX RESALE CERTIFICATE WITH THIS APPLICATION*******

How would you like to receive our Invoices? Please check one of the following

Fax#

Email

Mail