



ORIGINALS MUST BE MAILED TO:
PETER LUMBER COMPANY
P.O. BOX 32, PLEASANTVILLE, NJ 08232
BUSINESS CREDIT APPLICATION

Submit by Email Print Form
Tel: 609.641.9000 Ext. 5031
Fax: 609.272.0368
E-mail: candypic@peterlumber.com

LEGAL NAME OF BUSINESS:		BUSINESS WEBSITE:		APPLICATION DATE:	
BUSINESS STREET ADDRESS:		BILLING ADDRESS (STREET or PO BOX):			
CITY:	STATE:	ZIP:	CITY:	STATE:	ZIP:
BUSINESS PHONE#:		YEARS ESTABLISHED:		AMOUNT OF CREDIT REQUIRED:	
BUSINESS FAX#:	CELL#:	# OF EMPLOYEES:		ESTIMATED AMOUNT OF MONTHLY PURCHASES:	
A/P CONTACT NAME:		A/P #:	A/P E-MAIL:		
TYPE OF BUSINESS: <input type="checkbox"/> SOLE PROPRIETOR # _____					
<input type="checkbox"/> PARTNERSHIP # _____ LLP					
<input type="checkbox"/> CORPORATION # _____ LLC (please attach articles of formation/organization)					
WE ARE ENGAGED IN THE BUSINESS OF:		YEARS INCORPORATED:	STATE OF INCORPORATION:	CONTRACTOR LICENSE #:	
COMPANY OFFICERS (PRES/VP) / PRINCIPALS / MEMBERS-- ALL MUST BE NAMED (LIST ON BACK IF REQUIRED):					
NAME:	TITLE:	HOME ADDRESS:	HOME PHONE#:	DRIVERS LICENSE#:	
SS#					
NAME:	TITLE:	HOME ADDRESS:	HOME PHONE#:	DRIVERS LICENSE#:	
SS#					
NAME:	TITLE:	HOME ADDRESS:	HOME PHONE#:	DRIVERS LICENSE#:	
SS#					
BANK REFERENCE:		BANK NAME:			
ACCOUNT# & TYPE:		BANK ADDRESS:			
PHONE#:	FAX#:	NAME (as it appears on account):			
TRADE REFERENCES (Please provide Building Trade Suppliers not subcontractors with at least 18 months experience.)					
1. NAME:	PHONE:	ACCT.#			
ADDRESS:	FAX:				
2. NAME:	PHONE:	ACCT.#			
ADDRESS:	FAX:				
3. NAME:	PHONE:	ACCT.#			
ADDRESS:	FAX:				
TAX EMEMPT: YES / NO		HAS A TAX LIEN OR CIVIL SUIT BEEN FILED AGAINST APPLICANT OR ANY			
PLEASE ATTACH TAX EXEMPT CERTIFICATE		PRINCIPAL WITHIN THE LAST 6 YEARS? IF YES PLEASE EXPLAIN ON SEPARATE SHEET.			
		YES / NO			
PLEASE INDICATE: PURCHASE ORDERS ARE REQUIRED? YES / NO		PLEASE LIST AUTHORIZED PURCHASERS ALLOWED TO CHARGE:			
YES					
PLEASE NOTE: CHARGES WILL BE EXCEPTED ONLY FROM THE ABOVE LISTED PERSONS. ADDITIONS AND DELETIONS TO THIS LIST ARE EFFECTIVE ONLY UPON RECEIPT OF WRITTEN NOTICE TO PETER LUMBER COMPANY.					
I / WE AGREE TO PAY ACCORDING TO THE TERMS OF SALE: ALL BILLINGS DUE IN FULL, 10TH OF FOLLOWING MONTH. ACCOUNTS 60 DAYS PAST DUE ARE SUBJECT TO INTEREST CHARGES 1.5% PER MONTH, ON PAST DUE BALANCES. ANNUAL INTEREST RATE DOES NOT EXCEED 18% PER ANNUM. SHOULD IT BECOME NECESSARY TO PLACE THE ACCOUNT WITH A COLLECTION AGENCY OR ATTORNEY, THE APPLICANT AGREES TO PAY ALL COLLECTION COSTS AND ATTORNEY FEES IN ADDITION TO ALL OTHER SUMS DUE. APPLICANT AUTHORIZES PETER LUMBER CO. TO OBTAIN CREDIT AND FINANCIAL INFORMATION CONCERNING APPLICANT AT ANY TIME AND FROM ANY SOURCE. THE UNDERSIGNED WARRANTS THAT THE ABOVE AGREEMENT HAS BEEN CAREFULLY READ AND THE APPLICANTS UNDERSTANDS COMPLETELY.					
SIGNATURE:	PRINT NAME:	TITLE:	DATE:		
SIGNATURE:	PRINT NAME:	TITLE:	DATE:		
NOTE: IF PARTNERSHIP, PARTNERS MUST SIGN. IF CORPORATION OFFICER MUST SIGN. ALL MEMBERS OF LLC OR LLP MUST SIGN. (ON BACK IF NECESSARY)					

PLEASE CHECK WHICH PETER LUMBER BRANCH LOCATION.

NEW JERSEY: PLEASANTVILLE PITMAN HAMMONTON OCEAN CITY EGG HARBOR MILLVILLE MEDFORD
 PENNSYLVANIA: KENNETT SQUARE LIMERICK

SALES ID#: _____