

Wilson Plywood & Door

833 Shepherd Dr. Garland, Texas 75042 Phone (972) 494-3545
This application may be returned via fax to (972) 487-3750. Attention: Credit Department

Application for Open Account

In order for your application to be processed, please answer all questions.

Business Information

Is the company a: (check one) ☐ Proprietorship ☐ Partnership ☐ Corporation

Type of Business: _____ Number of years in business: _____ Date _____

Purchase on credit to be charged to: _____
EXACT NAME OF BUSINESS

Mailing Address: _____
STREET CITY STATE ZIP

Business Address: _____
STREET CITY STATE ZIP

Residential Address: _____
STREET CITY STATE ZIP

Phone/Email
BUSINESS PHONE RESIDENTIAL PHONE CELL PHONE EMAIL ADDRESS

Have you in the last 10 years:

Filed Bankruptcy? ☐ Yes ☐ No

Had a judgment taken against you? ☐ Yes ☐ No

If you checked yes, please explain: _____

Principals: (owner – partner – officers)

NAME(S)	TITLE	TEXAS DRIVERS LICENSE NUMBER	SOCIAL SECURITY NUMBER
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Are the principals involved in any subsidiary or other companies? ☐ Yes ☐ No If yes, please list names and addresses.

NAME	ADDRESS	CITY	STATE	ZIP
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NAME	ADDRESS	CITY	STATE	ZIP
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Bank References

NAME	PHONE	OFFICER
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Interim Financing

NAME	PHONE	OFFICER
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Approximate line of credit requested per month? _____

Trade Suppliers (Please include trim/door and lumberyard references)

NAME	ADDRESS	PHONE
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NAME	ADDRESS	PHONE
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NAME	ADDRESS	PHONE
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Note: Our terms are 10th of the month after purchase. It is understood that when payment is not met according with the agreed terms, all orders will be held from shipping. The undersigned personally guarantees payment of all invoices charged to the above named account.

GUARANTOR	DATE	GUARANTOR	DATE
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FOR OFFICE USE

DATE	APPROVED <input type="checkbox"/> YES <input type="checkbox"/> NO	CREDIT LIMIT	SALESMAN
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06/2012