

WYOMING MILLWORK CO.

WYOMING MILLWORK CO.
140 VEPCO BLVD.
P.O. BOX 387
CAMDEN, DE 19934
PHONE (302) 697-8650
FAX (302) 697-8690

MILTON MILLWORK LLC
T/A WYOMING MILLWORK CO.
227 MILTON-ELLENDALE HWY.
P.O. BOX 4
MILTON, DE 19968
PHONE (302) 684-3150
FAX (302) 684-4390

OFFICE USE ONLY:
APPROVED _____
LIMIT \$ _____
APPRVD _____
ENTRD _____

APPLICATION FOR CREDIT

APPLICANT INFORMATION:

(NAME OF CORPORATION, PARTNERSHIP, OR TRADE NAME IF SOLE PROPRIETORSHIP)

SS# _____

APPLICANT'S NAME: (FIRST, MIDDLE, LAST, SUFFIX)

SS# _____

SPOUSE'S NAME

APPLICANTS DATE OF BIRTH

SPOUSES DATE OF BIRTH

STREET ADDRESS

CITY/TOWN

STATE

ZIP CODE

MAILING ADDRESS IF DIFFERENT THAN ABOVE

HOME PHONE

WORK PHONE

CELL PHONE

BUSINESS INFORMATION:

(CHECK ONE)

SOLE PROPRIETORSHIP _____ CORPORATION _____ PARTNERSHIP

FEDERAL ID# _____ YRS. IN BUSINESS _____

TYPE OF BUSINESS:

(HOUSE PKGS/ADDITIONS/REMODELING/DECKS) \$ _____
EXPECTED MONTHLY PURCHASES

DOES YOUR FIRM USE JOB NAMES OR PURCHASE ORDERS? _____ YES _____ NO

IF CORPORATION OR PARTNERSHIP, LIST ALL OFFICERS/OWNERS & HOME ADDRESSES

NAME: _____ TITLE _____ SS# _____

ADDRESS: _____
STREET CITY/TOWN STATE ZIP

NAME: _____ TITLE _____ SS# _____

ADDRESS: _____
STREET CITY/TOWN STATE ZIP

TRADE CREDIT REFERENCES:

1. NAME _____ ACCT # _____
 ADDRESS _____
 PHONE () _____ FAX () _____

2. NAME _____ ACCT # _____
 ADDRESS _____
 PHONE () _____ FAX () _____

3. NAME _____ ACCT # _____
 ADDRESS _____
 PHONE () _____ FAX () _____

FINANCIAL INFORMATION:

RENT _____ OWN _____ LENGTH OF TIME _____
 MORTGAGE HOLDER _____
 PREVIOUS ADDRESS (IF LESS THAN 3 YRS) _____

NAME OF BANK _____ ACCT NUMBER _____
 CONTACT NAME _____ PHONE NUMBER _____
 ADDRESS _____

NAME OF LENDING INSTITUTION IF CONSTRUCTION MORTGAGE _____
 CONTACT NAME _____ PHONE NUMBER _____
 ADDRESS _____

WYOMING MILLWORK CO. PAYMENT SCHEDULE:

BILLING IS DONE ON THE 25TH OF THE MONTH; PAYMENT IS DUE IN FULL BY THE 10TH OF THE FOLOWING MONTH. ANY ACCOUNTS NOT PAID IN FULL BY THE DUE DATE WILL BE IMPOSED WITH A 2% FINANCE CHARGE ON THE UNPAID BALANCE.

IN THE EVENT THAT APPLICANT'S ACCOUNT IS REFERRED TO A COLLECTION AGENCY OR AN ATTORNEY FOR COLLECTION, APPLICANT AGREES THAT WYOMING MILLWORK SHALL BE ENTITLED TO COLLECT, IN ADDITION TO PRINCIPAL AND ACCRUED FINANCE CHARGES, A COLLECTION AGENCY OR ATTORNEY'S FEE OF TWENTY-FIVE PERCENT (25%) THEREOF.

IN CONSIDERATION OF CREDIT BEING EXTENDED BY WYOMING MILLWORK CO., TO THE APPLICANT, I / WE HEREBY CERTIFY THE TRUTHFULNESS AND ACCURACY OF THE FOREGOING STATEMENT.

BY:

_____ (SEAL) _____ (SEAL)

_____ (SEAL) _____ (SEAL)

GUARANTY

IN CONSIDERATION OF CREDIT BEING EXTENDED TO THE APPLICANT, I / WE THE UNDERSIGNED HEREBY UNCONDITIONALLY GUARANTEE FULL PAYMENT OF ALL INDEBTEDNESS THAT THE APPLICANT HAS HERETOFORE INCURRED OR MAY HEREAFTER INCUR, BY REASON OF THE PURCHASE OF MERCHANDISE BY OR ON BEHALF OF THE ABOVE APPLICANT BY ANY PERSON, FIRM, OR CORPORATION FOR THE ABOVE APPLICANT'S BENEFIT, LATE PAYMENT, PENALTIES, COST OF COLLECTION INCLUDING COURT COST AND REASONABLE ATTORNEY'S FEES OR OTHERWISE. THIS GUARANTEE SHALL BE BINDING UPON THE UNDERSIGNED, THEIR HEIRS, EXECUTORS, GUARANTY ADMINISTRATORS AND ASSIGNS.

_____ (SEAL) _____ (SEAL)
GUARANTOR GUARANTOR'S SPOUSE

_____ (SEAL) _____ (SEAL)
GUARANTOR GUARANTOR'S SPOUSE

PLEASE LIST ALL PERSONS PERMITTED TO CHARGE ON THIS ACCOUNT.

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AUTHORIZATION TO RELEASE CREDIT INFORMATION

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING

THIS STATEMENT IS SUBMITTED TO OBTAIN CREDIT AND I / WE AGREE THAT INQUIRIES MAY BE MADE TO VERIFY INFORMATION AND THAT CREDIT REFERENCES OR VERIFICATIONS MAY BE GIVEN BASED ON INQUIRIES FROM OTHER PARTIES. I / WE AGREE THAT WYOMING MILLWORK, CO. MAY CONTACT ANY TRADE REFERENCES LISTED AND/OR RUN A CREDIT REPORT FROM TRANSUNION, IN ORDER TO DETERMINE MY/OUR CREDIT WORTHINESS FOR THE BASIS OF ESTABLISHING A CHARGE ACCOUNT WITH WYOMING MILLWORK, CO. IF THIS IS A JOINT APPLICATION, THE UNDERSIGNED SHALL BE JOINTLY AND SEVERALLY LIABLE FOR ANY AND ALL CREDIT EXTENDED.

I / WE AUTHORIZE THE RELEASE OF ANY NECESSARY INFORMATION ON MY ACCOUNT(S) TO THE ABOVE COMPANY FOR CREDIT REFERENCE PURPOSES.

SIGNED:

COMPANY NAME

APPLICANT'S SIGNATURE

ADDRESS

SPOUSE'S SIGNATURE

CITY / STATE / ZIP

PRESIDENT / CEO SIGNATURE

DATE

PARTNER'S SIGNATURE