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 credit@timbertruss.com

Contractor's Credit Application

For internal use only: Credit approval Date _____ Credit Limit _____

*** SALESPERSON:** _____

Name _____
 Address _____
 City _____ State _____ Zip _____
 Phone _____ Alt# _____
 Email _____
 Fax # _____

PLEASE CHECK ONE:
 _____ Corporation (Year _____ State _____)
 _____ Partnership: State _____
 _____ Individually-Owned Business (Sole
 Proprietorship)
 Number of years in business _____ years
 VA Contractor's License Number _____

(by signing this credit application, I consent to allow Timber Truss to send faxes which contain material advertising the commercial availability or quality of any property, goods or services offered or provided by Timber Truss including, but not limited to, quotes, bids, pricing, etc.)

Monthly Credit Limit Desired \$ _____
 Federal I.D. No. _____
 Type of Business _____

People authorized to obtain information on this account:

Officer/Owner Name(s):

_____ Officer's or Owner's name	_____ Title	_____ Social Security No.
_____ Officer's or Owner's name	_____ Title	_____ Social Security No.

If subsidiary, name and address of parent company: _____

Trade References:

- Name _____ Acct No. _____ Phone _____
 Address _____ Fax _____
- Name _____ Acct No. _____ Phone _____
 Address _____ Fax _____
- Name _____ Acct No. _____ Phone _____
 Address _____ Fax _____
- Name _____ Acct No. _____ Phone _____
 Address _____ Fax _____

Financial Information:

If using cash:

Name of depository institution _____ Phone _____
 Type(s) of Accounts _____ Current balance(s) _____

If using established line of credit:

Institution providing line of credit _____ Phone _____
 Address _____
 Contact name _____ Line of credit limit: _____ Current balance _____

If using an approved construction loan:

Institution providing construction loan _____ Phone _____
 Address _____
 Loan Officer _____ Closing date: _____

