



Franklin
 BUILDING SUPPLY
 SERVICE IS OUR SPECIALTY

CREDIT APPLICATION

PART A: I AM APPLYING FOR CREDIT AS OR ON BEHALF OF:

an Individual or Married Couple a Sole Proprietorship a Partnership
 a Corporation a Limited Liability Company Other: _____

PART B: COMPLETE THIS PART IF YOU ARE APPLYING AS AN INDIVIDUAL, MARRIED COUPLE OR SOLE PROPRIETORSHIP.

Your Name: _____ S.S.N. _____ Mobile/Cell No. _____
 Trade Name: _____ Business Phone No. _____ Fax No. _____
 Name Of Spouse: _____ S.S.N. _____ Home Phone No. _____
 Your Address: _____
Street City State Zip
 Own Home?: _____ Mtg. Pmt.: _____ Rent?: _____ Monthly Rent: _____ How Long?: _____
 Your Employer: _____
Name Address Phone How Long?
 Spouse's Employer: _____
Name Address Phone How Long?
 Do you require Purchase Orders? Yes No E-mail Address: _____

PART C: COMPLETE THIS PART IF YOU ARE APPLYING AS A CORPORATION, PARTNERSHIP, LIMITED LIABILITY COMPANY OR OTHER ENTITY.

Company Name: _____ E.I.N. _____
 Trade Name: _____ State of Organization: _____ Date Started: _____
 Business Address: _____
Street City State Zip
 Mailing Address: _____
Street City State Zip
 Phone #'s. Office: _____ Fax Nos. _____
 Do you require Purchase Orders? Yes No E-mail Address: _____

In the spaces below, please provide the full name and home address of all partners, corporate officers, owners or members. (See Supplemental Signature Sheet)

| | | | |
|----------|-------|----------|-------|
| Name: | _____ | Name: | _____ |
| Title: | _____ | Title: | _____ |
| Address: | _____ | Address: | _____ |
| SSN: | _____ | SSN: | _____ |

PART D: TAX STATUS- CHECK ONE:

Taxable Exempt. Resale No. _____

PART E: TRADE/CREDIT REFERENCES: LIST ONLY THOSE FROM WHOM YOU PURCHASE ON OPEN ACCOUNT.

| | Name | Account # | Contact Person | Phone/Fax |
|----|-------|-----------|----------------|-----------|
| 1. | _____ | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ | _____ |
| 4. | _____ | _____ | _____ | _____ |

