

# PAYLESS BUILDING SUPPLY



Chico Location  
2600 Notre Dame Boulevard  
Chico, California 95928  
Telephone (530) 895-3228  
Fax (530) 895-3151



Anderson Location  
2004 W. Center St.  
Anderson, Ca 96007  
Telephone (530) 365-2701  
Fax (530) 365-2703



Susanville Location  
702-340 Johnstonville Rd.  
Susanville, Ca 96130  
Telephone (530) 257-5123  
Fax (530) 257-3293

## APPLICATION FOR A CREDIT ACCOUNT

FULL NAME: \_\_\_\_\_  
DBA: (if applicable) \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ City \_\_\_\_\_  
STREET ADDRESS (if different): \_\_\_\_\_ Zip Code \_\_\_\_\_  
PREVIOUS ADDRESS (if less than 6 mo. at current address): \_\_\_\_\_  
CITY \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_

SOC. SEC. #: \_\_\_\_\_ DRIVERS LIC. #: \_\_\_\_\_  
HOME PHONE# \_\_\_\_\_ WORK # \_\_\_\_\_  
FAX# \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

**[NOTE: Invoices and statements will be sent out via e-mail]**

EMPLOYMENT: \_\_\_\_\_ POSITION: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_

CREDIT REFERENCE (name, address & phone of 30 day trade accounts)

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_

Bank: \_\_\_\_\_ ACCOUNT #: \_\_\_\_\_

This Application also serves as Authorization of Payless Building Supply to verify credit references listed.  
This Application also serves as Authorization of Payless Building Supply to pull a Credit Report.

TYPE OF BUSINESS: \_\_\_\_\_ \*FEDERAL ID #: \_\_\_\_\_ ESTAB.: \_\_\_\_\_

CORPORATION\* \_\_\_\_\_ PROPRIETORSHIP \_\_\_\_\_ PARTNERSHIP \_\_\_\_\_

NAMES AND ADDRESSES OF OFFICERS OR OWNERS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**TERMS:** All accounts are due and payable on the 10<sup>th</sup> of the month following purchase. Accounts not paid by the 10<sup>th</sup> of the month are considered PAST DUE. Accounts not paid by the end of the month will be charged 1 ½% service charge per month, which is an annual percentage rate of 18%. In the event of default, or if litigation is brought to enforce collection on this account, purchaser agrees to pay all legal expenses and attorneys fees incurred by seller. This account is NOT designed to be a revolving account.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
(If corporation, signer must be officer)

NAME PRINTED: \_\_\_\_\_ CONTRACTOR'S LIC. #: \_\_\_\_\_

LIST OF AUTHORIZED PEOPLE TO SIGN FOR PURCHASES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DO YOU REQUIRE A P. O.? \_\_\_\_\_ YES \_\_\_\_\_ NO