Woodard's Concrete Products, Inc.

PO Box 8 629 Lybolt Road Bullville, NY 10915

Phone: 845-361-3471/Fax: 845-361-1050

Website: woodardsconcrete.com Email: woodardsjen@frontier.com

CREDIT POLICY

All credit must be established and approved by the credit manager.

Minimum Purchase Requirement:

There is a \$10,000.00 minimum purchase required before opening an account at Woodard's Concrete to ensure that only legitimate contractors receive discounts and to avoid setting up an account for one or 2 purchases.

There is a \$5000.00 credit limit for new accounts with extensions to be approved by the credit manager and/or the owner when applicable.

Payments:

Accounts are billed on the last day of the month and any purchase prior to that date is due on the last day of the following month.

Terms:

- 1. Customers in good standing will receive a 5% discount if the account balance is paid by the 10th of the following month by cash, check or ACH payment. If payment is made by the 10th of the following month by cc, the customer may take a 3% discount. This discount does not apply to custom items, pump systems and specially priced items. Invoices not receiving a discount should be noted on the bill and statement.
- 2. No discounts will be allowed on accounts paid after the 10th.
- 3. Accounts 30-45 days past due automatically become COD. No discounts will apply to past due accounts.
- 4. There is a service charge of 2% for all open accounts not paid after the 30th of the following month.

Application Procedure:

- 1. Fill out the **Company Information** form and return it to us.
- 2. Fill out **Part A** on the three **Credit Reference** forms and return them to us. Please be sure to include fax numbers or emails to speed up the process. We will forward these to your three suppliers listed on your company information form. We prefer that you email or fax the forms back to us.
- 3. Fill out the **Personal Guarantee** form and return it to us.
- 4. After receiving the credit references, the credit manager reviews and establishes credit.

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COMPANY INFORMATION

Date:			
Please circle one:	Corporation	Individual	Partnership
Name		Phone	
Address		Fax_	
How long in busin	essState	Incorporated	
FIN or Business II)#		
Contact person for	Accounts Payable		
	d person to sign checl	xs .	
Type of business_		Do y	ou require PO#'s
Principals Inform			
Name_	Title	The state of the s	D.O.B
Address			SS#
Home phone			
Name	Title		D.O.B
Address	To be to		SS#
Home phone			
References:			
Bank Name	Address	Phone & Fax	Acct # & Type
1	-		
2			
Supplier Name 1	Address	Phone Fax	Email
2			
3			
financial information whom I/we have do the strictest confider of this application, in with the terms of our understood that creducessary to obtain a nterest at the rate of	n from the bank(s), or ne business. It is und nee and used only in or it is agrees that all pur recredit policy. Shou it privileges may be vassistance in collecting 2% per month (or m	ther financial institution erstood that any such it consideration of this ap chases will be paid in the ld I/we not pay according	nformation will be held in oplication. Upon approval full and is accordanceing to terms, it is bodard's Concrete find it to Lywe agree to pay by law), reasonable
Print name		Title	Date

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PERSONAL GUARANTEE

In consideration of the W		
(the Applicant), the undersigned	individual(s) he	ereby personally guarantees payment o
any and all obligations of the Ap	plicant to Wood	dard's Concrete Products, Inc. This
guarantee shall be continuing and	d unlimited and	may be terminated only on 120 days
written notice sent by certified m	ail to Woodard	's Concrete Products, Inc. Woodard's
Concrete may exercise its rights	under this guara	intee without first taking any action
against the Applicant. The under	rsigned waives	notice of default and non-payment, and
consents to the extension or mod	ification of cred	it terms to the Applicant without notice
to me. I hereby represent I have:	a personal net v	worth in an amount sufficient to pay any
and all present and future indebte	dness of Applic	ant to Woodard's Concrete Products,
Inc., and I will not permit Applica	ant to charge m	ore on this account than I have assets to
pay.		
As guarantor	Date	Print name

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CREDIT REFERENCE INQUIRY

Part A (To be filled out by cre	dit applicant)
Date	
Name of Reference	
Address	
	or you to extend credit information of the financial for promptness, responsibility and integrity of our
	Signed
Part B (To be filled out by cred	lit reference)
Customer Name	
Address	
Date account opened for credit_	
Who is authorized agent for the	account
How long have you known the a	ibove
Contact person for accounts pay	able
Date of last sale	
Have your business relations bee	en satisfactory
rignest Credit last six months_	Open account
Terms of sale	D1
	Balance past due \$
	ow Risk: Good / Fair / Poor
Comments: (information of assistant)	stance to us in extending credit; your reply will be
confidential and we will gladly re	eciprocate any time)
ignature / Title	

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CREDIT REFERENCE INOURY

	applicant)
Date	
Name of Reference	
Address	
	ou to extend credit information of the financial r promptness, responsibility and integrity of our
	Signed
Part B (To be filled out by credit re	eference)
Customer Name	
Address	
Who is authorized agent for the acc	count
Who is authorized agent for the acc How long have you known the above	ve
Who is authorized agent for the acc How long have you known the abov Contact person for accounts payable	counte_
Who is authorized agent for the acc How long have you known the abov Contact person for accounts payable Date of last sale	vee
How long have you known the above Contact person for accounts payable Date of last sale Have your business relations been s	esatisfactory
Who is authorized agent for the accommod How long have you known the above Contact person for accounts payable Date of last sale Have your business relations been so Highest Credit last six months	vee eatisfactory
Who is authorized agent for the accommod How long have you known the above Contact person for accounts payable Date of last sale Have your business relations been so Highest Credit last six months Terms of sale	veeatisfactoryOpen account
Who is authorized agent for the accommod How long have you known the above Contact person for accounts payable Date of last sale Have your business relations been so Highest Credit last six months	vee satisfactoryOpen account Balance past due \$

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Part A (To be filled out by credit	applicant)
Date	
Name of Reference	
Address	
	ou to extend credit information of the financial r promptness, responsibility and integrity of our
	Signed
Part B (To be filled out by credit r	reference)
Customer Name	
Address	
Date account opened for credit	
Who is authorized agent for the acc	count
How long have you known the abo	ve
Contact person for accounts payable	e
Date of last sale	
have your business relations been s	satisfactory
Highest Credit last six months Ferms of sale	Open account
	Dalama and Jun C
Current balance \$	
Payment: Prompt / Fair / Slow	
	nce to us in extending credit; your reply will be
confidential and we will gladly recip	procate any time)
ignature / Title	