## Woodard's Concrete Products, Inc.

PO Box 8 Bullville, NY 10915 845-361-3471/Fax 845-361-1050

### **Credit Policy**

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

#### **Minimum Purchase:**

There is a \$1500.00 minimum purchase required before the account is opened unless you are preapproved by the credit manager.

#### Reason:

To ensure that only legitimate contractors receive discounts and to avoid setting up an account for only one or two purchases.

There is a \$2500.00 extended credit limit with extensions to be approved by the credit manager.

#### 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:

- Customers in good standing will receive a 5% discount if the account balance is paid by the 10<sup>th</sup> of the following month by cash or check. If payment by the 10<sup>th</sup> is made by credit card, the customer may take a 3% discount. This discount does not apply to custom items, pump systems and other specially priced items. Invoices not receiving a discount will be noted on your bill.
- 2. No discount 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 by the 30<sup>th</sup> 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 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:		Individual	
Name		Phor	ne
Address		Fax	
How long in busine	ssState	Incorporated	
FIN or Business ID	#		
Contact person for A	Accounts Payable		
Manage of such a 1			
Type of business		Do	you require PO#'s
rimcipals Informa	mon:		
Name	Title		D.O.B
Address			SS#
Home phone			
Name	Title		D.O.B
Address			SS#
Home phone			
References:			
Bank Name	Address	Phone & Fax	Acct # & Type
1			
1			
2			
Summlion Nome			
Supplier Name			
1			
2			
2			
3			
	lication, Woodard's	Concrete is authorize	ed to obtain credit and/or
			ons or suppliers with
			information will be held in
			application. Upon approval
			full and is accordance
		ld I/we not pay accord	
			Voodard's Concrete find it
		g any past due balanc	
			le by law), reasonable
		t costs allowable by l	
Authorized			
SIGNATURE			
Print name		Title	Date
		EMICONING DATE	

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## PERSONAL GUARANTEE

any and all obligations of the App guarantee shall be continuing and written notice sent by certified ma Concrete may exercise its rights u against the Applicant. The unders consents to the extension or modi- to me. I hereby represent I have a and all present and future indebted	individual(s) her plicant to Wooda unlimited and n ail to Woodard's under this guaran signed waives no fication of credit a personal net wo dness of Applica	eby personally guarantees payment of ard's Concrete Products, Inc. This may be terminated only on 120 days Concrete Products, Inc. Woodard's
As guarantor	Date	Print name

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CREDIT REFERENCE INQUIRY

Date account opened for credit
Address  To whom it may concern:  I give my permission for you to extend credit information of the financial standing and general reputation for promptness, responsibility and integrity of our company.  Signed  Part B (To be filled out by credit reference)  Customer Name  Address  Date account opened for credit
To whom it may concern:  I give my permission for you to extend credit information of the financial standing and general reputation for promptness, responsibility and integrity of our company.  Signed  Part B (To be filled out by credit reference)  Customer Name  Address  Date account opened for credit
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Part B (To be filled out by credit reference)  Customer Name  Address  Date account opened for credit
Customer Name  Address Date account opened for credit
Address Date account opened for credit
Address Date account opened for credit
Date account opened for credit
Date account opened for credit
Who is authorized agent for the account
TT 1 1 1
How long have you known the above
Contact person for accounts payable
Date of last sale
Have your business relations been satisfactory
Highest Credit last six months Open account
Terms of sale
Current balance \$Balance past due \$
Payment: Prompt / Fair / Slow Risk: Good / Fair / Poor
Comments: (information of assistance to us in extending credit; your reply will be
confidential and we will gladly reciprocate any time)

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CREDIT REFERENCE INQUIRY

Part A (To be filled out by credit applicant)
Date
Name of Reference
Address
To whom it may concern:  I give my permission for you to extend credit information of the financial standing and general reputation for promptness, responsibility and integrity of our company.
Signed
Dowt D (To be 511 d and 1 11 6
Part B (To be filled out by credit reference)
Customer Name
Address
Date account opened for credit
Who is authorized agent for the account
How long have you known the above
Contact person for accounts payable
Date of last sale
Have your business relations been satisfactory
Highest Credit last six months  Open account
Terms of sale
Current balance \$Balance past due \$
Payment: Prompt / Fair / Slow Risk: Good / Fair / Poor
Comments: (information of assistance to us in extending credit; your reply will be
confidential and we will gladly reciprocate any time)
lignature / Title

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Part A (To be filled out by credit applicant)	
Date	
Name of Reference	
Address	
To whom it may concern:  I give my permission for you to extend credit information of the financial standing and general reputation for promptness, responsibility and integrity of our company.	
Signed	
Part B (To be filled out by credit reference)	
The same of the sa	
Customer Name	
Address	
Who is authorized agent for the account	
How long have you known the above	
Contact person for accounts payable	
Date of last sale	
Have your business relations been satisfactory	
flighest Credit last six months Open account	
Terms of sale	
Terms of sale  Current balance \$ Balance past due \$  Payment: Prompt / Fair / Slow Pick: Good / Fair / Poor	
a shield. I tompt / Tan / Slow Risk. Good / Tan / Foot	
Comments: (information of assistance to us in extending credit; your reply will be	
confidential and we will gladly reciprocate any time)	
ignature / Title	