

OFFICE USE ONLY

Account Name: _____

Account Number: _____



APPLICATION FOR CASH ACCOUNT

BENSON'S LUMBER AND HARDWARE, INC
P.O. Box 444
Derry, New Hampshire 03038-0444
(603) 432-2531
800-479-5439
www.bensonslumber.com

BENSON'S LUMBER AND HARDWARE, INC
P.O. Box 1110
Londonderry, New Hampshire 03053-1110
(603) 432-9863
800-479-5439
www.bensonslumber.com

(Hereinafter individually and collectively referred to as "Benson's")

The undersigned hereby applies to Benson's for the establishment of a cash account on the terms and conditions provided for herein, and represents and warrants the following credit information to be true, accurate and complete.

Section 1: Individuals and/or Corporation

You're Name: _____

Business Name: _____

Business Address: _____

Phone Number: _____ Fax Number: _____

Social Security Number: _____

Email Address: _____

Section 2: General Information

The principal checking account of the business is:

Bank: _____

Office Location: _____

Contact Person: _____ Contact Phone: _____

Section 3: Terms and Agreement

The information provided in this application to Benson's is for the purpose of establishing a cash account and the undersigned certifies that this information is complete and accurate as of this date. The undersigned agrees to promptly notify Benson's of any changes in the information provided.

The undersigned agrees that the payment terms are as follows:

Payments are due at time of order and as may otherwise be established from time to time by Benson's. Delinquent accounts are subject to continuing late charges at the prevailing rate set by Benson's which, until changed in writing by Benson's, is one and one-half percent (1½%) per month each month until paid in full. Any customer checks, which do not clear the bank, are subject to a \$28.00 service charge plus repayment of any cash or prepayment discounts given. The undersigned agrees to pay all costs of collection, including attorney's fees, should legal action be required to enforce this agreement.

Date: _____ Applicant: _____

SIGNATURE

WITNESS

PRINTED NAME

OFFICE USE ONLY

Approved Line of Credit: _____

Selling Price: _____

Terms Code: _____

Account Code: _____

Salesperson: _____

Comments/Conditions: _____

Approved By: _____

Date of Approval: _____