



Credit Application

Company Name _____
 DBA (if different) _____
 Contact Person _____
 Address _____
 Phone () _____ Fax () _____

Federal Tax ID or Social Security No. _____
 Type of Business _____
 No. of Employees _____
 Data Business Established _____

Types of Products You Will Purchase _____
 Amount of Credit Requested \$ _____ **(Must Complete)**

Are you a (check one):
 Corporation S Corporation Sole Proprietor Partnership

State of Incorporation _____

Names, Titles and Addresses of Your Three Chief Corporate Officers

_____	_____
_____	_____
_____	_____

Name and Address of Your Resident Agent

Partnership

Name and Addresses of the Partners

_____	_____
_____	_____
_____	_____

Sole Proprietorship

Are you sales tax exempt? Yes _____ No _____

Have you ever had credit with us before? Yes _____ No _____

If yes, under what name? _____

Authorized Purchasers _____

Purchase Order Required? Yes _____ No _____

TRADE REFERENCES

Name _____

Address _____

Phone () _____ Fax () _____

Name _____

Address _____

Phone () _____ Fax () _____

Name _____

Address _____

Phone () _____ Fax () _____

BANK REFERENCES

Name _____

Address _____

Phone () _____ Fax () _____

Name _____

Address _____

Phone () _____ Fax () _____

Name _____

Address _____

Phone () _____ Fax () _____

I represent that the above information is true and is given to induce Canyon Rock Co. to extend credit to the applicant. My company and I authorize Canyon Rock Co. to make such credit investigation as Canyon Rock Co. sees fit, including contracting the above trade references and banks and obtaining credit reports. My company and I authorize all trade references, banks and credit reporting agencies to disclose to Canyon Rock Co. any and all information concerning the financial and credit history of my company and myself.

I have read the terms and conditions stated below and agree to all of those terms and conditions.

Authorized Signature _____

Printed Name _____

Title _____

Date _____

PERSONAL GUARANTEE

If the credit customer is a Corporation, then those signing this application, whether Signing as an officer or not, personally guarantee payment for all purchases on credit By the Corporation and agree to be bound by the terms and conditions stated below.

DATED _____ SIGNATURE _____

GENERAL TERMS AND CONDITIONS

1. Invoices are generated on the 15th and the last day of every month. Each scale ticket will be listed and summarized on each invoice. Your driver's pink copy provides the details to match to our invoice. If you need an additional set of copies, you may call to request them.
2. Early pay discounts on our products will be printed on each invoice. Our discount is 2% of qualified purchases, before sales tax. Early pay discounts are allowed only on current accounts, when invoices are paid within ten days of the invoice date.
3. A service charge of 1.5% per month will be added to all amounts billed if not paid by the end of the month.
4. No additional credit will be extended to past due accounts unless satisfactory arrangements are made with the Office Manager.
5. Fax your completed application to: (707) 887-9258

ALL LINES MUST BE COMPLETED AS APPLICABLE. INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.