



9100 Centre Pointe Drive, Suite 210 ♦ West Chester, OH 45069  
Credit Phone: (866) 915 - 0446 Credit Fax: (513) 870 -1326

**BUSINESS NAME:** \_\_\_\_\_ **TRADE NAME/DBA (if any)** \_\_\_\_\_

**TYPE OF ORGANIZATION:** Corporation \_\_\_ LLC \_\_\_ Partnership/Sole Proprietor \_\_\_ **DATE ESTABLISHED:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**STREET ADDRESS:** \_\_\_\_\_ **BILLING ADDRESS:** \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**DUN & BRADSTREET #** \_\_\_\_\_ **FEDERAL TAX ID #** \_\_\_\_\_

**SALES TAX EXEMPT:** Yes \_\_\_ No \_\_\_ (if NO, enter the county and rate) County: \_\_\_\_\_ Rate: \_\_\_\_\_

*If exempt, a signed exemption certificate must be provided with the completed application.*

**CONTACTS:**

**PURCHASING:** \_\_\_\_\_ **ACCOUNTS PAYABLE:** \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Phone: \_\_\_\_\_  Fax: \_\_\_\_\_

Email: \_\_\_\_\_  Email: \_\_\_\_\_

☆ *To receive your invoices via Fax or Email, check the appropriate box. If neither are selected invoices will be sent via US Mail.*

**PRINCIPALS/OWNERS:**

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone number: \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone number: \_\_\_\_\_

**BANK REFERENCES:**

Name	Contact	Account Number	Phone Number	Fax Number
1. _____				
2. _____				

**TRADE REFERENCES:** Please provide at least 3 references with each having a *minimum credit experience of \$10,000.*

Company Name	Contact	Phone Number	Fax Number
1. _____			
2. _____			
3. _____			

I hereby represent that I am authorized to submit this application on behalf of the company named above, and that the information provided is for the purpose of obtaining credit and is warranted to be true. I hereby authorize CLARKWESTERN Building Systems Inc ("ClarkWestern") to investigate the references listed pertaining to our credit and financial responsibility. It is agreed and understood that all necessary collection, legal expenses and interest (at 18% per year) may be charged any debtor in the event of default or failure to pay for goods or services sold and delivered. I further represent that the company applying for the credit has the financial ability and willingness to pay all invoices within the established terms.

All sales by ClarkWestern are made subject to ClarkWestern's Standard Terms & Conditions on the reverse side of this form. ClarkWestern expressly rejects any different or additional terms or conditions in Buyer's Purchase Order or similar communication, unless expressly agreed upon in writing by a duly authorized representative of ClarkWestern.

Authorized Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_