

PERSONAL APPLICATION FOR CREDIT AND AGREEMENT FOR CREDIT TERMS

ALL ITEMS MUST BE COMPLETED TO BE CONSIDERED

CHACE BUILDING SUPPLY of CT., INC.

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ROUTE 171

PUTNAM, CONNECTICUT 06260
Phone (860) 928-2747 Outside Connecticut 1-800-297-0137

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P.O. BOX 775

49 PUTNAM PIKE - ROUTE 12
DAYVILLE, CONNECTICUT 06241
Phone (860) 774-9621 Outside Connecticut 1-800-545-5464

IF APPROVED, CREDIT LINE WILL BE FOR
EITHER OR BOTH COMPANIES AT OUR DISCRETION.

OFFICE USE ONLY

DATE	TERMS	APPROVED BY
ASSIGNED SALESMAN		LIMIT
		DATE APPROVED

CREDIT REQUESTED \$ _____ FINANCING ARRANGED AT _____

DOING CONSTRUCTION AT _____ LOT# _____ PLAT# _____

APPLICANT	FIRST NAME PLEASE PRINT	MIDDLE NAME	LAST NAME	SOCIAL SECURITY #	PHONE		
CO-APPLICANT	FIRST NAME PLEASE PRINT	MIDDLE NAME	LAST NAME	SOCIAL SECURITY #	PHONE		
BILLING ADDRESS	STREET	CITY	STATE	ZIP	HOW LONG	<input type="checkbox"/> OWN	MORTGAGE BALANCE _____
						<input type="checkbox"/> RENT	RENT AMOUNT _____
HOME ADDRESS IF DIFFERENT	STREET	CITY	STATE	ZIP	HOW LONG	MORTGAGE HOLDER _____	
						LANDLORD NAME _____ PHONE _____	
FORMER RESIDENCE (2 YEARS)	STREET	CITY	STATE	ZIP	HOW LONG	BUSINESS PHONE	
APPLICANT'S EMPLOYMENT	ADDRESS			HOW LONG	POSITION	GROSS INCOME	
						<input type="checkbox"/> WK <input type="checkbox"/> MO	
CO-APPLICANT'S EMPLOYMENT	ADDRESS			HOW LONG	POSITION	GROSS INCOME	
						<input type="checkbox"/> WK <input type="checkbox"/> MO	
NAME, ADDRESS, AND PHONE # OF NEAREST RELATIVE NOT LIVING WITH YOU						RELATIONSHIP	
BANK	TYPE OF ACCOUNT			ACCOUNT #			

CREDIT REFERENCES					
APPLICANT			CO-APPLICANT		
FIRM			FIRM		
PHONE #	BALANCE	MONTHLY PAYMENT	PHONE #	BALANCE	MONTHLY PAYMENT

IN CONSIDERATION OF EXTENDING CREDIT TO THE AFORESAID APPLICANT, THE UNDERSIGNED HEREBY UNCONDITIONALLY GUARANTEES THE TIMELY PAYMENT OF ALL SUMS, EVEN IF IN EXCESS OF THE APPLIED FOR OR ESTABLISHED CREDIT LIMIT NOW DUE OR WHICH MAY HEREAFTER BECOME DUE AND PAYABLE BY VIRTUE OF EXTENSION OF CREDIT TO THE APPLICANT, INCLUDING, WITHOUT LIMITING THE GENERALITY OF THE FOREGOING, LEGAL AND OTHER COSTS OF ATTEMPTS TO COLLECT SAID SUMS FROM CUSTOMER AND THE UNDERSIGNED, AND LAWFUL INTEREST ON SAID SUM. BALANCE IS DUE **NET 25 DAYS** FROM THE DATE THAT APPEARS ON THE STATEMENT. INTEREST RATE OF **1.5%** WILL BE APPLIED TO ALL DELINQUENT BALANCES WITH A **\$.50 MINIMUM** FINANCE CHARGE (**18% PER ANNUM**). THIS AGREEMENT IS INTENDED TO COVER A RUNNING ACCOUNT OR ACCOUNTS BY THE CUSTOMER AND WILL REMAIN IN FULL FORCE AND EFFECT UNTIL 14 DAYS AFTER WITHDRAWN. SUCH WITHDRAWALS SHALL BE EFFECTIVE PROSPECTIVELY ONLY UNTIL ALL SUMS OF MONEY DUE ARE SATISFIED. THIS AGREEMENT IS A CONTRACT AND SHALL BE INTERPRETED UNDER THE LAWS OF THE STATE OF MASSACHUSETTS AND SHALL BE EFFECTIVE IMMEDIATELY.

I/WE DO HEREBY PERSONALLY GUARANTEE PAYMENT ON THIS ACCOUNT AT ALL TIMES. I/WE HEREBY AUTHORIZE YOU TO OBTAIN CREDIT INFORMATION FROM ALL NECESSARY SOURCES FOR AN ACCURATE CREDIT INVESTIGATION OF MY/OUR CREDIT HISTORY.

DATE

APPLICANT SIGNATURE

PRINT NAME

DATE

CO-APPLICANT SIGNATURE

PRINT NAME