



New Account Application: Business

728 South Hiram Road
Cornish ME 04020

P: 207625-8045 F: 207-625-3721

66 Water Street
West Newfield ME 04095

P: 207-793-2541 F: 207-793-4265

Credit Line Requested On Terms Of 30 Days: _____ Corporation: _____
Partnership: _____
Sole Proprietorship: _____

Account Name: _____

Mailing Address: _____

Nature of Business: _____ Age of Business: _____

Owners/Officers of Business: _____

Address (if different): _____

Phone: () _____ SS#: _____

Credit References (please, no credit card numbers)

1 _____

Name Address Phone

2 _____

Name Address Phone

3 _____

Name Address Phone

4 _____

Name Address Phone

Bank Name: _____ Acct # _____ Ph: () _____

Persons authorized to charge: _____

Terms:

I understand that all purchases are due Net 30 Days. If my balance exceeds 30 days, I agree to pay a late charge computed by a "Periodic Rate" of 1 ½% per month which is an annual rate of 18% applied to the balance outstanding on the statement date.

I understand that Moulton Lumber Company Inc may refuse to permit additional charges on overdue accounts , Moulton Lumber Company Co Inc. does thereby not waive any rights it has to collect past due balances, or to refuse credit in the future. In addition, I will be liable for any collection costs, including a reasonable attorney fee.

Personal Guarantee:

Business Name _____

In consideration of the extension of credit to the above named business entity, the undersigned principals, jointly and severally, and personally, guarantee payment of all charges, billings, and interest costs imposed hereafter in any open account extended to the above named business entity. In the event that such charges, billings, and interest costs are not promptly paid, the undersigned hereby guarantees as primary guarantors the payment of 1. Any balance due on the aforesaid open account; 2. Interest at the rate of 18% per annum upon the unpaid balance; 3. Reasonable attorneys fees in the event legal action is undertaken for the collection of any sum due on account.

I hereby authorize the person to whom this application is made, or any credit bureau or other investigative agency by such person, to investigate any references herein listed or statements or other data obtained from me or from any other person pertaining to my credit and financial responsibility

Signature _____ Title: _____

Name (print) _____

Date: _____

Signature _____ Title: _____

Name (print) _____

Date: _____