



COMPANY NAME / DBAs	
WEBSITE	
MAIN CONTACT / BUYER NAME	
EMAIL	
BILL TO	SHIP TO
	PHONE
ACCOUNTS PAYABLE CONTACT	
AP EMAIL	
PREFERRED METHOD OF RECEIVING INVOICES & STATEMENTS	
Email	Mail

## I HAVE READ THE TERMS AND CONDITIONS

 Yes

## OFFICERS AND/OR PARTNERS

Name	Phone	Email

## TRADE REFERENCES (MIN. 3) LIST ONLY CREDITORS WHO AGREE TO PROVIDE REFERENCES PROMPTLY. PLEASE BE SURE CREDITORS ARE FAMILIAR WITH THIS BUSINESS NAME.

Company	Contact	Fax	Email

The information in this application is true to the best of my knowledge. I hereby authorize The Wood Company to obtain any information it considers necessary concerning this application. The undersigned promises to pay for all purchases in accordance with your terms of sale. If at any necessary time the undersigned is unable to pay for said purchases when due, the undersigned agrees to pay and authorizes you to bill my account with interest computed at 1.5% per month (18% per annum) on any past due amount. If it becomes necessary for your company to incur collection costs for any amount due under the agreement the undersigned promises to pay additional collection costs including reasonable attorney fees. By signing this agreement I authorize The Wood Company to send communication via email or fax including invoices, statements and/or sales and marketing materials. I also accept and commit to the terms and conditions as stated in the attached document. \* Upon acceptance by The Wood Company, this application will constitute a sales and purchase agreement.

CUSTOMER PRINTED NAME

CUSTOMER SIGNATURE

DATE

FOR OFFICE USE ONLY		
SALES MGR.	INIT.	
IND. REP.		
CUSTOMER #		
MARKET	REGION	CUST. TYPE
OPENING DATE		
CREDIT LIMIT		
TERMS		