



# Lebanon Building Supply

Account Type: \_\_\_\_\_  
 Instructions: \_\_\_\_\_  
 Approved by: \_\_\_\_\_  
 DC#: \_\_\_\_\_  
 225 N. 10<sup>th</sup> St., Lebanon, PA 170046  
 PH#: (717)272-4649  
 www.LebanonBuildingSupply.com

## APPLICATION FOR CREDIT

### Instructions:

1. Complete ALL sections (Missing information will delay processing)
2. Sign appropriate sections of this form

### Applicant Information

Business Legal Name: \_\_\_\_\_  
 DBA (If Applicable): \_\_\_\_\_  
 Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_  
 Business Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 County: \_\_\_\_\_  
 FED ID#: \_\_\_\_\_ Tax Exempt: YES \_\_\_\_\_ NO \_\_\_\_\_  
 (If Tax exempt, must provide copy of Tax Exempt Certificate)

### Business Structure

Corporation: S Corp: \_\_\_\_\_ C Corp: \_\_\_\_\_  
 Partnership: LP: \_\_\_\_\_ LLP: \_\_\_\_\_ LLC: \_\_\_\_\_  
 Sole Proprietorship: \_\_\_\_\_  
 Non Profit: \_\_\_\_\_ (If Tax exempt, must provide copy of Tax Exempt Certificate)

Purchase Order Required: Yes \_\_\_\_\_ No: \_\_\_\_\_  
 Annual Sales: \_\_\_\_\_  
 Number of Locations: \_\_\_\_\_  
 Number of Employees: \_\_\_\_\_

Other: \_\_\_\_\_  
 If Parent Company Exists: Division: \_\_\_\_\_ Subsidiary: \_\_\_\_\_  
 Name of Parent Company: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone#: \_\_\_\_\_ Fax: \_\_\_\_\_

### Owners/Officers

|   |   |   |
|---|---|---|
| Name: _____<br>Title: _____<br>SSN#: _____<br>Ph# : _____<br>Email: _____ | Name: _____<br>Title: _____<br>SSN#: _____<br>Ph# : _____<br>Email: _____ | Name: _____<br>Title: _____<br>SSN#: _____<br>Ph# : _____<br>Email: _____ |
|---|---|---|

### Bank Information

**\*\* By signing this agreement, we authorize our bank to release information to this prospective supplier for the purpose of obtaining credit \*\***  
 Bank Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

|  |   |
|--|---|
| Bank Contact: _____<br>Title : _____<br>Phone: _____ Ext.: _____ | Main Account #: _____ Type: _____<br>Accounts: Checking: _____ Savings: _____ Loan: _____<br>If Loan, Approximate Balance: \$ _____ |
|--|---|

### Financial Statements

**\*\* ATTACH A COPY OF THE COMPANY'S TWO MOST RECENT YEAR END FINANCIAL STATEMENTS \*\***

Business Office Use Only RECEIVED: YES \_\_\_\_\_ NO \_\_\_\_\_ DATE: \_\_\_\_\_ TIME: \_\_\_\_\_ INT: \_\_\_\_\_

### Trade References

|  |  |  |
|--|--|--|
| Name: _____<br>Contact: _____<br>Title: _____<br>Phone: _____<br>Fax: _____<br>Email: _____<br>Address: _____<br>City: _____ State: _____<br>Zip Code: _____ | Name: _____<br>Contact: _____<br>Title: _____<br>Phone: _____<br>Fax: _____<br>Email: _____<br>Address: _____<br>City: _____ State: _____<br>Zip Code: _____ | Name: _____<br>Contact: _____<br>Title: _____<br>Phone: _____<br>Fax: _____<br>Email: _____<br>Address: _____<br>City: _____ State: _____<br>Zip Code: _____ |
|--|--|--|

**Additional Information**

Have any of the listed business's listed above filed for bankruptcy? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, when? \_\_\_\_\_  
Have any of the principles or business had a judgement against them? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, when? \_\_\_\_\_  
Who in your organization is responsible for purchasing inventory? Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Is your business a member of a buying group? If so, group name: \_\_\_\_\_

**Accounts Payable**

Who is your accounts payable? Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_  
Do you accept invoices via EDI? Yes: \_\_\_\_\_ No: \_\_\_\_\_  
Will you make payments via electronic transfer (i.e. ACH or Wire Transfer)? Yes: \_\_\_\_\_ No: \_\_\_\_\_  
\*Please note any fees attached to these types of transfers are at the responsibility of the customer. LBS will not cover such fees.\*

**ATTESTATION AND CONFIRMATION THAT ALL INFORMATION ENTERED ABOVE IS TRUE AND CORRECT**  
**\*\* Signatures must be hand written. No electronic signatures accepted \*\***

Authorized Signature: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_  
Printed or Typed Name: \_\_\_\_\_ Printed or Typed Name: \_\_\_\_\_  
Title: \_\_\_\_\_ Title: \_\_\_\_\_  
Date: \_\_\_\_\_ Date: \_\_\_\_\_

**YES, I HAVE RECEIVED THE ATTACHED TERMS AND CONDITIONS ALONG WITH NOTIFICATION OF THE CONTINUING PERSONAL GUARANTY AFFILIATED WITH THIS AGREEMENT.**

Authorized Signature: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_  
Printed or Typed Name: \_\_\_\_\_ Printed or Typed Name: \_\_\_\_\_  
Title: \_\_\_\_\_ Title: \_\_\_\_\_  
Date: \_\_\_\_\_ Date: \_\_\_\_\_

**CONFIDENTIALITY DISCLAIMER**

LEBANON BUILDING SUPPLY TAKES CONFIDENTIALITY VERY SERIOUSLY. THIS CONFIDENTIAL INFORMATION MAY BE USED BY LEBANON BUILDING SUPPLY FOR THE SOLE PURPOSE OF DETERMINING THE INTEGRITY OF CREDIT ELIGABILITY AND TO ACTIVELY HOLD AN ACCOUNT WITH THIS COMPANY.