

APPLICATION FOR CREDIT

EUREKA READY MIX

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NAME

TELEPHONE

STREET ADDRESS

FAX

MAILING ADDRESS

CITY STATE ZIP CODE

YEARS AT THIS ADDRESS

THE FOLLOWING INFORMATION MUST BE COMPLETED IN FULL-ALL INFORMATION WILL BE HELD IN STRICTEST CONFIDENCE

FOR CORPORATION PARTNERSHIP PROPRIETORSHIP INDIVIDUAL INCORPORATED WITHIN LAST 12 MONTHS

RESALE # _____ FEDERAL ID # _____

O NAME PHONE

W ADDRESS

N CONTRACTOR LICENSE # SOCIAL SECURITY #

E

R NAME PHONE

S ADDRESS

H

I NAME PHONE

P ADDRESS

B NAME PHONE

A ADDRESS

N ACCOUNT NUMBER

K ACCOUNT REPRESENTATIVE

R NAME PHONE

E ADDRESS FAX

F

E NAME PHONE

R ADDRESS FAX

E

N NAME PHONE

C ADDRESS FAX

E

S

I (WE) CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT, AND THAT WE CAN AND WILL COMPLY WITH ACCOUNT TERMS: NET 30 ; FINANCE CHARGE 1 1/2 MONTHLY;18% ANNUAL

I (WE) AUTHORIZE EUREKA READY MIX TO OBTAIN CREDIT INFORMATION FROM THE ABOVE ACCOUNTS.

DATE SIGNATURE TITLE

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SIGNITURE REQUIRED TO COMPLETE APPLICATION