

"Committed to Excellence"

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www.standridgegranite.com

CREDIT APPLICATION This form must be used. No other will be accepted.

COMPANY NAME:		DATE:			
ADDRESS:					
CITY: \$		STATE:	ZIP:	PHONE:	
ACCOUNTS PAYABLE ADDRESS:				FAX:	
ACCOUNTS PAYABLE CONTACT:			PHONE:		
# OF YEARS IN BUSINESS SALES UNDER THIS NAME: VOLUME: \$			TOTAL NUMBE	ER OF EMPLOYEES:	
PAYMENT PERSONALLY GUARANTEED BY:					
ADDRESS:			SIGNATURE:		
	NAME OF OWNER		PHONE		
OWNERSHIP	HOME ADDRESS	CITY		STATE ZIP	
	HOWE ADDITED	3111		STATE Z	
	NAME OF OWNER		PHONE		
	HOME ADDRESS	CITY		STATE ZIP	
TRADE REFERENCES FAX NUMBERS MANDATORY!	COMPANY NAME		PHONE		
	CONTACT NAME		FAX		
	COMPANY NAME		PHONE		
	CONTACT NAME		FAX		
	COMPANY NAME		PHONE		
	CONTACT NAME		FAX		
	COMPANIANT		BUONE		
	COMPANY NAME		PHONE		
	CONTACT NAME		FAX		
BANK REFERENCE	BANK NAME	ACCOUN ⁻	Γ# PHONE	FAX	
	ADDRESS	CITY		STATE ZIP	
	ADDRESS	CITT		STATE ZIF	
	BANK NAME	ACCOUN	Γ# PHONE	FAX	
	ADDRESS	CITY		STATE ZIP	
ALL STATEMENTS MADE HEREIN ARE TRUE AND ACCURATE TO THE BEST OF OUR KNOWLEDGE. WE AUTHORIZE THE ABOVE COMPANY					
TO MAKE ANY AND ALL INQUIRIES NECESSARY FOR ACTION ON THIS - CREDIT APPLICATION. WE HEREBY INDEMNIFY THE ABOVE COMPANY AND ITS AGENTS FROM ANY LIABILITY RESULTING FROM			AUTHORIZED SIGNATURE		
THEIR CREDIT SURVEY.		TITLE	DATE		
TYPE OF BUSINESS AS A CONDITION OF STANDRIDGE GRANITE CORP. EXTE				RIDGE GRANITE CORP. EXTENDING	
□ SOLE PROPRIETORSHIP □ SUBSIDIARY □ CORPORATION IN			CREDIT AND PROVIDING SERVICE OR PRODUCT, CUSTOMER AGREES TO PAY ALL COURT COSTS AND ATTORNEY FEES IN THE		
□ PARTNERSHIP □ DIVISION STATE OF EVENT LITIGATION ENSUES FOR COLLECTION.					