

CREDIT APPLICATION



INSULATED METAL PANELS

Requested Credit Line: _____

Company's Legal Name: _____

DBA: _____

Federal ID Number: _____

DUNS Number: _____

Web Address: _____

Physical Address: _____

Billing Address: _____

Phone: _____

Fax: _____

PO Required? Yes: No:

Tax Exempt?* Yes: No:

City: _____ State: _____ Zip: _____

City: _____ State: _____ Zip: _____

* If yes, please attach resale certificate.

CORPORATION / LIMITED LIABILITY COMPANY

State Where Incorporated: _____ Date Incorporated: _____ Years in Business: _____

President / Manager / Owner: _____

CFO / Treasurer: _____

PARTNERSHIP / SOLE PROPRIETORSHIP

Partner / Proprietor: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Partner: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

BANK INFORMATION / AUTHORIZATION

Bank Name 1: _____

Account Number: _____

Phone: _____

Fax: _____

Bank Name 2: _____

Account Number: _____

Phone: _____

Fax: _____

The signature below authorizes the release of any and all deposit and loan account information to Green Span Profiles from the firm(s) named above .

TRADE REFERENCES

Name 1: _____

Phone: _____

Fax: _____

Name 2: _____

Phone: _____

Fax: _____

Name 3: _____

Phone: _____

Fax: _____

ADDITIONAL INFORMATION

Accounts Payable Contact: _____

Phone: _____

Fax: _____

Email Address: _____

Invoice Receipt: Via Email: Via Fax: Via Mail:

Have you previously purchased materials from Green Span Profiles?

Yes: No:

If yes, under what name? _____

*Bankruptcy (Company)? Yes: No:

*If yes, please attach an explanation.

*Bankruptcy (Owners)? Yes: No:

*If yes, please attach an explanation.

The signature below certifies that the information provided in this application is warranted to be true and is for the purpose of obtaining credit from Green Span Profiles, LP (GSP). This application must be faxed to 936.372.7018, mailed to PO Box 730, Waller, TX 77484 or emailed to mark.daves@gspc.com. In the absence of an original mailed application, the signer agrees that the faxed or emailed copy shall act as the original. GSP is not responsible for any delays in the sales process resulting from the applicant's failure to provide the required information. At any time, if there are any changes to the information provided, please send a fax or email, on company letterhead, detailing the changes.

Signature: _____

Date: _____

Print Name: _____

Title: _____