

# INTERSTATE BUILDING MATERIALS, INC.

322 Laurel Street • P.O. Box 708 • Pittston, Pennsylvania 18640

Phone: 1-800-338-9997 Fax Credit Application to: 260-373-1293

## CREDIT APPLICATION

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_ Credit Line Requested: \_\_\_\_\_

Trade Name: \_\_\_\_\_ State of Incorporation: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Type of Business: \_\_\_\_\_ (Corp /Partnership/Sole,LLC) Business Phone: \_\_\_\_\_

FAX#: \_\_\_\_\_ Tax Identification #: \_\_\_\_\_ Years in Business: \_\_\_\_\_

Street Address \_\_\_\_\_

Email Invoices: ( ) Yes ( ) No Email Address: \_\_\_\_\_

Fax Invoices : ( ) Yes ( ) No Have you ever filed bankruptcy? ( ) Yes ( ) No If Yes, when? \_\_\_\_\_

Current Financial Statements Attached ( ) Yes ( ) No Contact Name: \_\_\_\_\_

Accounts Payable Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Accounts Payable Email Address: \_\_\_\_\_

### Company Officers:

Name \_\_\_\_\_ Social Security # \_\_\_\_\_

Title \_\_\_\_\_ Marital Status \_\_\_\_\_

Home Address \_\_\_\_\_

Name \_\_\_\_\_ Social Security # \_\_\_\_\_

Title \_\_\_\_\_ Marital Status \_\_\_\_\_

Home Address \_\_\_\_\_

### Bank and Non Window Manufacturer Credit References

Bank \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

Account# \_\_\_\_\_ Type of Account \_\_\_\_\_ Officer \_\_\_\_\_

Trade Account \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Address \_\_\_\_\_

Trade Account \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Address \_\_\_\_\_

Trade Account \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Address \_\_\_\_\_

**IF ALL REFERENCE INFORMATION IS NOT COMPLETED, IT WILL DELAY THE APPLICATION**