



APPLICATION FOR CREDIT ACCOUNT

We at Lynwood Building Materials, Inc. thank you for the interest shown in the many products we sell. In order for us to ship material to you on an "open account" basis, we must process this "Application for Credit".

Please complete this form in its entirety, making sure that each question is answered. You can be assured that all information we receive will be kept strictly confidential.

Before signing and returning this credit application/agreement, please be sure that you have read the entire document and that you understand all the terms. Please contact our Credit Department, (210) 477-3062, to review any questions you may have or to discuss any special handling required (buying or billing instructions, etc.).

For faster processing, you may wish to fax this completed credit app to our credit department at:
(210) 477-3090

The original must be returned to:

Lynwood Building Materials, Inc.
1146 W. Laurel
San Antonio, TX 78201

After we receive your completed application we will process it and advise you as soon as possible of our determination. We will, of course, contact you if we discover any problems.

We again thank you for your interest in our company and are looking forward to serving your building needs.



LYNWOOD BUILDING MATERIALS, INC.



BUILDING MATERIALS, INC.

APPLICATION FOR CREDIT ACCOUNT

PART 1 - GENERAL INFORMATION

| | | |
|---|--------------------|-----------------------------------|
| FULL BUSINESS NAME | | |
| ADDRESS - STREET, TOWN OR CITY, STATE, ZIP CODE | | |
| BILLING ADDRESS (if different from above) | | |
| TELEPHONE NUMBER () | NATURE OF BUSINESS | YEARS IN BUSINESS UNDER THIS NAME |
| AVERAGE MONTHLY CREDIT LINE DESIRED | | PO NUMBER REQUIRED? |

PART II - OWNERSHIP (Complete applicable Section A, B, or C)

A. IF CORPORATION:

| | | |
|------------------------------|-----------------------------|-------|
| PRESIDENT | HOME ADDRESS | |
| CITY, STATE & ZIP CODE | TELEPHONE NUMBER () | S.S.# |
| SECRETARY | HOME ADDRESS | |
| CITY, STATE & ZIP CODE | TELEPHONE NUMBER () | S.S.# |
| REGISTERED AGENT | ADDRESS OF REGISTERED AGENT | |
| STATE IN WHICH INCORPORATED: | YEAR INCORPORATED: | |

B. IF A PARTNERSHIP (List all partners - if more than 3, give requested information in space marked "DETAILS"):

| | | |
|---|-------------------------|-------------|
| NAME | ADDRESS | |
| CITY, STATE & ZIP CODE | TELEPHONE NUMBER () | S.S.# |
| NAME | ADDRESS | |
| CITY, STATE & ZIP CODE | TELEPHONE NUMBER () | S.S.# |
| NAME | ADDRESS | |
| CITY, STATE & ZIP CODE | TELEPHONE NUMBER () | S.S.# |
| BUSINESS NAME CERTIFICATE FILED IN COUNTY OF: | STATE OF: | DATE FILED: |

C. IF A PROPRIETORSHIP:

| | | |
|---|----------------|-------------------|
| NAME | DATE OF BIRTH | S.S.# |
| PRESENT ADDRESS | HOW LONG: | TELEPHONE NUMBER: |
| PREVIOUS ADDRESS (if less than 3 years at present address) | HOW LONG: | |
| CITY, STATE & ZIP CODE | | |
| NAME & ADDRESS OF BANK | ACCOUNT NUMBER | CHECKING SAVINGS |
| NAME & ADDRESS OF BANK | ACCOUNT NUMBER | CHECKING SAVINGS |
| YOUR NEAREST LIVING RELATIVE NOT LIVING WITH YOU (NAME, ADDRESS & TELEPHONE NUMBER) | | RELATIONSHIP |
| PERSONAL REFERENCE (NAME, ADDRESS & TELEPHONE NUMBER) | | |
| BUSINESS NAME CERTIFICATE FILED IN COUNTY OF: | STATE OF: | DATE FILED: |

HAS ANY OFFICER(S) EVER BEEN ADJUDGED BANKRUPT OR HAD ANY JUDGEMENTS, GARNISHMENTS OR OTHER LEGAL PROCEEDINGS AGAINST HIM (THEM)? YES NO IF "YES", STATE FULL DETAILS

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PART III - ACCOUNT INFORMATION & REFERENCES

| | | | |
|---|-----------------------|-----------------|-----------------------------|
| ACCOUNT INFORMATION: | | | |
| WILL YOUR PURCHASES BE TAX EXEMPT? (If YES, please include a Tax Exemption Certificate) | | | YES NO |
| ACCOUNTS PAYABLE CONTACT: | A/P TELEPHONE NUMBER: | A/P FAX NUMBER: | A/P E-MAIL ADDRESS: |
| WHO WILL BE AUTHORIZED TO PURCHASE? | | | |
| | | | |
| | | | |
| BANK REFERENCES: | | | |
| Name | Address & Branch | | Account Number |
| Name | Address & Branch | | Account Number |
| SUPPLIER REFERENCES: | | | |
| Name | Address | Acct.No. | Telephone Number # FAX # |
| Name | Address | Acct.No. | Telephone Number # FAX # |
| Name | Address | Acct.No. | Telephone Number # FAX # |
| Name | Address | Acct.No. | Telephone Number # FAX # |
| ATTACH BUSINESS FINANCIAL STATEMENT OR INDICATE BUSINESS NET WORTH | | | |

I (We) furnish the above information and certify its correctness for purposes of opening a Charge Account, and I (We) hereby authorize Lynwood Building Materials, Inc. to obtain such information it may require concerning the statements made in the application and agree that the application shall remain its property whether or not a Charge Account is granted. I (We) also agree that the information may be given to a Credit Bureau. I (We) affirm that I (We) have carefully reviewed each of the answers given to the questions on this application and agree they are correct. I (We) acknowledge that Lynwood Building Materials, Inc. relies upon the information provided herein in connection with any opening of a charge account.

Date: _____ Signature (Individual) _____

Corporate/Partnership Name _____

Officer/Partner Signature _____ (Title) _____

PART IV - JOB / PROJECT INFORMATION

| | |
|----------------------|------------------|
| Project Name | |
| Job Site Address | |
| General Contractor | Address |
| Super / Contact Name | Telephone Number |
| Property Owner | Address |
| Contact Name | Telephone Number |
| Bonding Company | Address |
| Agents Name | Telephone Number |



TERMS OF SALE

2% 10th Prox – Net 30th

A finance charge of 1.5% per month, will be added to all past due balances. This is an annual percentage rate of 18%.

Should it become necessary to place an account for collection, the buyer shall be liable for all costs incurred; including reasonable attorney's fees of 25%.

Date: _____

Signature of Individual

Corporate/Partnership Name

Signature of Officer/Partner

Title

PERSONAL GUARANTEE

Date: _____

In consideration of your complying with my (our) request hereby made to you to sell your goods in accordance with your terms, to the company named, in this application, hereinafter called the Purchaser. I, the undersigned, or We, and each of us jointly and severally agree to and hereby become surety to you for the payment of such sum or sums of money as may now be due, or may at any time hereafter become due to you from the purchaser.

I (We) further agree that my (our) liability under this instrument in all cases shall be construed as one of surety and that all notices statutory or otherwise, required to be given to me (us) are expressly waived.

Signature / Address

Signature / Address

Signature / Address

Signature / Address

Witness:

FAX to 512-477-3099

TEXAS SALES AND USE TAX EXEMPTION CERTIFICATION

| | |
|---|------------------------------|
| Name of purchaser, firm or agency | |
| Address (Street & number, P.O. Box or Route number) | Phone (Area code and number) |
| City, State, ZIP code | |

I, the purchaser named above, claim an exemption from payment of sales and use taxes for the purchase of taxable items described below or on the attached order or invoice form:

Seller: LYNWOOD BUILDING MATERIALS INC.

Street address: 1146 W. LAUREL / PO BOX 41-FF City, State, ZIP code: SAN ANTONIO, TX 78201

Description of items to be purchased or on the attached order or invoice:

Purchaser claims this exemption for the following reason:

I understand that I will be liable for payment of sales or use taxes which may become due for failure to comply with the provisions of the Tax Code: Limited Sales, Excise, and Use Tax Act; Municipal Sales and Use Tax Act; Sales and Use Taxes for Special Purpose Taxing Authorities; County Sales and Use Tax Act; County Health Services Sales and Use Tax; The Texas Health and Safety Code; Special Provisions Relating to Hospital Districts, Emergency Services Districts, and Emergency Services Districts in counties with a population of 125,000 or less.

I understand that it is a criminal offense to give an exemption certificate to the seller for taxable items that I know, at the time of purchase, will be used in a manner other than that expressed in this certificate and, depending on the amount of tax evaded, the offense may range from a Class C misdemeanor to a felony of the second degree.

| | | | |
|--------------|-----------|-------|------|
| sign here | Purchaser | Title | Date |
| | | | |

NOTE: This certificate cannot be issued for the purchase, lease, or rental of a motor vehicle.

THIS CERTIFICATE DOES NOT REQUIRE A NUMBER TO BE VALID.

Sales and Use Tax "Exemption Numbers" or "Tax Exempt" Numbers do not exist.

This certificate should be furnished to the supplier. Do **not** send the completed certificate to the Comptroller of Public Accounts.



TEXAS RESALE CERTIFICATE

| | |
|---|------------------------------|
| Name of purchaser, firm or agency | Phone (Area code and number) |
| Address (Street & number, P.O. Box or Route number) | |
| City, State, ZIP code | |
| Texas Sales or Use Tax Permit Number (or out-of-state retailer's registration number or date applied for Texas Permit - must contain 11 digits if from a Texas permit) (Mexican retailer's must show their Federal Taxpayers Registry (RFC) number on the certificate and give a copy of their Mexican registration form to the seller.) | |

I, the purchaser named above, claim the right to make a non-taxable purchase for resale of the taxable items described below or on the attached order or invoice form:

Seller: Lynwood Building Materials FAX # 477-3099

Street address: 1146 W. Laurel / PO BOX 41-FF

City, State, ZIP code: San Antonio Tx 78201

Description of items to be purchased on the attached order or invoice:
Building Materials

Description of the type of business activity generally engaged in or type of items normally sold by the purchaser:
Supply of Building Materials & Contractor Supplies

The taxable items described above, or on the attached order or invoice, will be resold, rented, or leased by me within the geographical limits of the United States of America, its territories and possessions, or within the geographical limits of the United Mexican States, in their present form or attached to other taxable items to be sold.

I understand that if I make any use of the items other than retention, demonstration or display while holding them for sale, lease or rental, I must pay sales tax on the items at the time of use based upon either the purchase price or the fair market rental value for the period of time used.

I understand that it is a criminal offense to give a resale certificate to the seller for taxable items that I know, at the time of purchase, are purchased for use rather than for the purpose of resale, lease, or rental and, depending on the amount of tax evaded, the offense may range from a Class C misdemeanor to a felony of the second degree.

| | | | |
|-----------|-----------|-------|------|
| sign here | Purchaser | Title | Date |
|-----------|-----------|-------|------|

This certificate should be furnished to the supplier. Do **not** send the completed certificate to the Comptroller of Public Accounts.