Credit Application

John Sixt & Son, Inc. 13990 East Schutt Road Chaffee, New York 14030 716-492-2390 Fax 716-492-1012

Two Locations Chaffee, NY & Little Valley, NY



Contact Information			Billing Information					
Contact Name			AP Contact Name					
Company Name			Company Name					
Address			Address					
Phone			Phone					
Fax			Fax					
E-mail			E-mail					
General Compa	any Informatio	n						
Federal Tax ID number				Principal Officer				
Dunn & Bradstreet number			Title					
Legal Structure (check	k all that apply)							
	Corporation		LLC		Sole Propr	ietor	3 200	
	Partnership		LLP		Non-Profit			
In Business Since				Business Type				
Bank Reference	es							
Bank Name (#1)				Bank Acct#/Type				
Bank Address			Bank City/State/Zip					
Bank Contact			Bank Phone					
Bank Name (#2)			Bank Acct#/Type					
Bank Address			Bank City/State/Zip					
Bank Contact			Bank Phone					
Trade Reference	es							
Company	Contact	Street	Street		City	State	Phone	
1.								
2.								
3.								
4.								
Signature & Au	thorization							
nereof. Any misreprese	ovided nerein is a com ntation or fraudulent i	plete and accura	ate repr ided wi	ng below is an authoriz esentation of the compa Il be the basis for defau contact the above refe	any's financ It under this	ial situation	as of the date	
Signature			Date					
Print Name			Business Title					

JOHN SIXT AND SON, INC LUMBER AND BUILDING MATERIALS

13990 East Schutt Road Chaffee, New York 14030-9766 Phone (716) 492-2390 * (716) 496-8964 FAX (716) 492-1012



619 Rock City Street Little Valley, New York 14755 (800) 836-0769 * (716) 938-6521 Fax (716) 938-6710

IF YOU ARE BUILDING A HOUSE, THIS MUST BE FILLED OUT ALSO!

STATEMENT OF IMPROVEMENT OF REAL PROPERTY

The undersigned, as a purchaser of supplies and materials from JOHN SIXT & SON INC. Does hereby certify that all such materials and supplies shall be delivered to the indicated address and shall be used in the improvement of real property located at the said address.

The following is relevant information to the improvement:

Name and address of the owner of real property	
Name	
Address	
Legal description of the real property (attach a copy of current deed setting forth to owner of the property and the legal description of the property to be improved.)	he
Financing: The improvement to the real property is being financed by:	
Name of financing company	
Address	
The undersigned does hereby certify that the information furnished herewith is traccurate to the best of his/her knowledge and is given as an inducement to extend to the undersigned.	ue an credit
DateSign	nature
Witness	

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GUARANTY

	to JOHN SIXT & SON, INC. in order to induce it to excreditor of Name
Address	
arising hereafter in its favor against tremain in full force until I revoke it by vouch revocation however shall be effected into after the company receives claims guaranteed by this instrument of affected by JOHN SIXT & SON, INC.'s any claim guaranteed hereby. If the De SIXT & SON, INC.'s claims when due, proceed against the Debtor, to pay on de SON, INC. from the Debtor, as well as SIXT & SON, INC. by reason of the Debtor.	SON, INC. the prompt payment when due, of any claim the Debtor. This is a continuing guaranty, which shall written notice to JOHN SIXT & SON, INC. ctive only as to claims arising out of the transactions my notice. This obligations shall cover the renewal of all rextensions of time of payment thereof, and shall not be surrender or release of any other security held by it for btor defaults by failing to make payment on any of JOHN I agree without JOHN SIXT & SON, INC. first having to lemand all sums due or to become due to JOHN SIXT & all losses, attorney fees, and expenses incurred by JOHN tor's default.
, 20	
	Print
Witness	Signature

We must have this page in order to open an account. This page must either be notarized or signed and witnessed by on the officers here at the store.

Thank you.

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Please choose the following option and return it with your credit application.

COMPANY NAME:
I WOULD LIKE TO RECEIVE MY MONTHLY STATEMENT VIA US MAIL.
I WOULD LIKE TO RECEIVE MY MONTHLY STATEMENT VIA FAX. PLEASE FAXE MY PAPERWORK TO:
I WOULD LIKE TO RECEIVE MY MONTHLY STATEMENT VIA EMAIL. PLEASI EMAIL MY PAPERWORK TO THE FOLLOWING EMAIL ADDRESS: