

KINGSTON LUMBER SUPPLY COMPANY

P.O. Box 169
Kingston, Washington, 98346
(360) 297-3600 or (206) 842-0104
Administration FAX: (360) 297-8391

PERSONAL APPLICATION FOR CREDIT ACCOUNT

PLEASE COMPLETE AND SIGN THIS APPLICATION. THE INFORMATION YOU PROVIDE WILL GREATLY FACILITATE A DECISION REGARDING YOUR REQUEST FOR A CREDIT ACCOUNT.

Name: _____ Single
 Married Spouse's Name _____

Mailing Address: _____
Street or P.O. Box City State Zip Code

Street Address: _____
Street City State Zip Code

At this Street Address I/We are: Owner(s) Buying Renting

Resided at this Address since: _____ Home Phone _____ Work Phone _____

I/We previously resided at: _____ For How Long? _____
Street City State Zip Code

Age _____ Spouse's age _____ Number of Dependents _____

Social Security No. _____ Spouse's Social Security No. _____

Employer _____ Occupation _____ How Long? _____

Employer's Address _____ Phone _____ Salary _____

Spouse's Employer _____ Occupation _____ How Long _____

Employer's Address _____ Phone _____ Salary _____

Other Income - Amount and Source _____

You need not disclose alimony, maintenance or child support unless you wish such income considered

_____ Checking Loan

Bank _____ Branch _____ Savings Other

Credit Reference _____
Name Address

Credit Reference _____
Name Address

Personal Reference _____
Name Address

Nearest Relative _____
Name Address

Major debts _____

For each debt, list who is owed, address and amount

Make of auto(s) _____

For each vehicle, list year, make, license no., state of license and who is owed what amount(s)

Are you involved in a lawsuit? Yes No

If yes, what is the Court and Case Number _____

Have you ever been in bankruptcy? Yes No

If yes, what year & circumstances? _____

Maximum amount of credit anticipated per month \$ _____

TERMS OF THIS ACCOUNT

1. All sales will be C.O.D. until credit application is approved. The undersigned applicant hereby agrees that purchases (labor/materials/rentals) are payable on this account in full on or before the 10th day of each month following the date/month of purchase. Accounts may be paid by check or cash. Bankcard and debit cards are not an acceptable form of payment. Applicant agrees to pay for invoices when due, or the account shall accrue interest as set forth below. Applicant agrees that materials returned and claims must be accompanied by the original invoice and submitted within thirty (30) days of purchase. There will be a minimum of a ten percent (10%) restocking charge on all returned lumber yard items. *There will be no returns, refunds, or credits for special order items.* If this account is not paid in full on the 10th day of each month for all charges made during the prior month, applicant agrees that KINGSTON LUMBER SUPPLY COMPANY (hereinafter referred to as "KLS") may at its sole discretion and without prior notice to applicant:
 - (a) Charge interest at the rate of 1.5% per month and maximum service charges as permitted by law, based on the principal amount of all charges, made subject to a minimum service charge of \$1.00 per month;
 - (b) Require all further transactions be on a cash basis, until the account is brought current; or
 - (c) Terminate any unfulfilled orders or discontinue any deliveries until all accounts are brought current;
 - (d) Declare this account to be in default.
2. The undersigned applicant agrees to complete a "Job/Project Description Form" when beginning charges to this account for materials used on property not owned by applicant.
3. In the event this account is declared to be in default by KLS as defined herein, and collection and or legal action is taken by KLS, the undersigned applicant agrees to pay to KLS all attorneys fees and costs whether or not a lawsuit is filed, collection fees, and interest and service charges incurred by KLS on this account. Applicant agrees that venue of any court action by KLS on this account shall be in Kitsap County, Washington, regardless of applicant's residence or place of business.
4. The undersigned applicant agrees that invoices and monthly statements are conclusive and accurate in all respects unless undersigned applicant notifies KLS within ten (10) days of receipt of invoices or statement. Any defects in materials, workmanship, equipment or delivery shall be reported in writing to KLS within seven (7) days of receipt of same or all warranty claims are waived.

Customer agrees to accept creditor's employee signature (delivery driver) as proof of delivery and acceptance of materials if no customer representative is available on site. Customer agrees to indemnify, defend and hold KLS harmless from any claim arising out of or related to materials or equipment purchased pursuant to this Agreement.

- 5. KLS may apply payments at its' sole discretion unless applicant clearly indicates how payments are to be applied. Generally, payments will be applied to the first or earliest charges incurred.**
- 6. Applicant cannot transfer or assign this account relationship without creditor's prior written consent.**
- 7. The following persons are authorized to purchase, sign for and receive materials for my account, and applicant shall immediately inform KLS in writing of any changes: (Please see attached "CHARGE ACCOUNT VERIFICATION" sheet).**
- 8. The undersigned applicant agrees that KLS reserves the right to change the terms of this account at any time, without prior notice to the undersigned.**
- 9. Applicant acknowledges these terms, and that applicant has read, understands and fully agrees to the terms of this account, as the account terms are stated herein as well as any terms and conditions stated on the invoices. Faxed copies of all signatures on this application shall be considered as originals.**
- 10. We reserve the right to check Customer's credit history, directly and through credit reporting agencies, and to report to others our credit experience with any Customer.**

Date: _____

Printed Name

Signature

W.D.L. No.

Printed Name (Spouse)

Signature (Spouse)

W.D.L. No.

CO-SIGNOR/PERSONAL GUARANTEE

In consideration of KLS opening an account and extending all future credit to the applicant named herein, _____, I unconditionally guarantee full payment to KLS, for any and all future charges made on this account, by the applicant named herein, in the event of any default

I personally guarantee all the terms of this account, as the account terms are stated herein and consent to any extension or alteration of any obligation and guarantee such without prior notice. This shall be an open, unlimited and continuing guarantee in effect until the undersigned has notified KLS in writing of its cancellation. The undersigned agrees to pay all reasonable attorney's fees, costs and expenses incurred in the enforcement of this guarantee, whether or not suit is filed. The undersigned agrees to promptly notify KLS of any change in address, and to waive presentment, demand, protest, notice of non-payment, and any release or discharge arising from extension of time, or any other cause, other than actual payment in full of any and all future charges made on this account. A personal credit report may be processed.

By signing here you are agreeing to be held personally liable for payment of charges incurred.

I personally guarantee payment of this account as set forth above on behalf of my marital community.

Date

Printed Name

Signature

Address

City, State, Zip

Social Security No.

Washington Driver's License Number



Charge Account Verification

Many of our charge account customers have made arrangements with us to allow family members, friends or co-workers to charge materials or services on their accounts. This arrangement is a real convenience for those customers.

Here is how it works. You supply us with a list of people authorized to charge on your account. We enter those names into our computer. When we get a request to charge to your account, our salesperson selects the name of the person requesting to charge from the list of "authorized" names on the computer. The name of that person prints on the invoice next to the signature line giving you a record of who charged to your account. If the person is not on your list of authorized signers, we won't allow him or her to charge on your account.

If you have people who, from time to time, charge materials or services on your account, please list their names below. We can then be sure that only people you want charging on your account are able to do so. If you have any questions, please call our Accounting Department.

(Please check one)

- The following are the only people authorized to charge on my account:
- Please Add the following people to the list you currently have on file:
- Please delete the following people from my Authorization list:

1)	9)
2)	10)
3)	11)
4)	12)
5)	13)
6)	14)
7)	15)
8)	16)

(If you have additional names of people authorized to charge on your account, please submit them on a second page.)

Account Name: _____
 Account Number: _____
 Print Name: _____
 Signature: _____
 Date: _____

Home Phone: _____
 Work Phone: _____
 Cell Phone: _____
 Pager Number: _____
 Fax Number: _____