



MIDWAY / OROVILLE BUILDING SUPPLY INC.

P.O. Box 447

TONASKET, WA 98855-0447

Name _____ Home Phone: _____
 Company Name: _____ Cell Phone: _____
 Mailing Address: _____ Business Phone: _____
 _____ Business Fax: _____
 _____ City/State/Zip Code _____
 Previous Address _____ How Long _____
 Social Security No. _____ Date of Birth _____
 Employer _____ Ph #: _____
 Contractor No. _____

Business Account:
 Type of Business _____
 Washington State Resale # _____
Must complete a state resale certificate to be on file

PERSONAL REFERENCE: _____
Name Address Phone #

CREDIT REFERENCES:
Name Address Phone #
 1. _____
 2. _____
 3. _____

BANK REFERENCE:
Name / Branch / Address / Phone #

CREDIT CARD REFERENCE:
 VISA or MASTERCARD Credit Card # _____ Expiration Date _____
 Cardholder's Name _____

***** Credit Policy *****

1. Payments are due in full by the 10th of each month following purchase. _____ initial
2. There will be a service charge of 1.5% per month on past due invoices.
3. Account 60 days past due will be charged to the above credit card (you will be given notice).

In the event of nonpayment of any amounts due, the undersigned agree to pay, if the account is referred to an attorney for collection, a reasonable attorney' fee and, if suit is brought, all court costs and legal expenses in addition thereto. The Undersigned further stipulate and agree that any such suit shall be instituted and maintained in any court of competent jurisdiction in the County of Okanogan, State of Washington. _____ initial

If this credit application is made for and on behalf of a corporation or limited liability company, the undersigned stipulate that they are not only signing in their capacity as an authorized agent or officer of the company, but also in their individual and personal capacities and hereby stipulate and agree to guarantee payment of any sums due by said corporation, including late charges, attorney's fees, court costs, and any and all other collection costs and expenses. I make this guarantee as an inducement to the company to extend credit, and this guarantee is made for and on behalf of the undersigned and the marital community of myself and my spouse.

Signature: _____ Spouse's Signature: _____

MIDWAY BUILDING SUPPLY
 132 CLARKSON MILL ROAD TONASKET, WA 98855
 TEL 509-486-2888 FAX 509-486-1363

OROVILLE BUILDING SUPPLY
 33081 HWY. 97 OROVILLE, WA 98844
 TEL 509-476-3149 FAX 509-476-3480