

Signed

APPLICATION FOR COMMERCIAL CREDIT ACCOUNT

C&M Truss LLC dba CMT Components 8319 Ashridge Arnheim Rd., Sardinia, OH 45171 office (937) 446-3400 fax 937-446-3449

Name			Federal ID #	
Street Address	City		State	Zip Code
Phone Date Fi	irm Started		Corporation	Proprietorship
Jace	···· startea		Partnership	Other
Net Worth of Business Amoun	nt of Credit Re	quested		
NAMES OF	OFFICER	RS/PARTNERS	S/OWNERS	
Name		Name		
ocial Security Number	_	Social Security Nur	mber	
Home Address	_	Home Address		
City/State/Zip		City/State/Zip		
Title	_	Title		
	BANK RE	EFERENCES		
Bank Name Contact Name	_	Bank Name		Contact Name
Street Address		Street Address		
City/State/Zip		City/State/Zip		
Phone		Phone		
Checking Account #	_	Checking Account	#	
oan #	_	Loan #		
SU	IPPLIER	REFERENCES	S	
Name	_	Name		
Street Address		Street Address		
City/State/Zip		City/State/Zip		
Phone		Phone		
High Credit Balance		High Credit Bala	nce	
this application is accepted and an account establishe components. subject to the terms and conditions of saic account numbers and all users thereof shall be jointly a account number and all applicable late charges. (Currenonth which is an ANNUAL PERCENTAGE RATE of 24% payments and credits. Minimum late charge is \$2.00).	d account, and and severally ntly the late	nd any future ame v liable for repaym charge is compute	ndments thereto. Acc nent of all amounts in ed by applying a singl	count holders issued curred through the u e monthly rate of 2%

date

Signed

date



PERSONAL GUARANTEE OF CORPORATION INDEBTEDNESS

C&M Truss LLC dba CMT Components 8319 Ashridge Arnheim Rd., Sardinia, OH 45171 office (937) 446-3400 fax 937-446-3449

In consideration that C&M Truss LLC	dba CIVI I Componei	its of Sardinia Onio, sells and	delivers to
name of business	an entity	authorized to do business in t	he State of Ohio,
building materials and other merchan	idise on credit, on ar	nd after the date hereof, I, or w	ve, do hereby jointly and
severally guarantee payment to said (CMT Components fo	r all building materials and me	erchandise so
sold and delivered from time to time	and also for all build	ing materials and merchandise	heretofore sold and
delivered by said CMT Components	to	name of husiness	·
		name of basiness	
This shall be a continuing guarantee for to said			
prior to the time that notice of its term in writing by mail or otherwise.			
It is understood that CMT Componen undersigned a complete statement of unpaid.			
I, or we, hereby waive notice of the ac notice of default in payment by the sa	•		
and all other notices required or custo	omarily given under	name of business like circumstances.	
Further, should		defa	ault on any payment on
the statement of account for building I, or we, hereby guarantee to pay all c CMT Components which might be incindebtedness owed on the statement	collections expenses curred by CMT Comp c of account by	including a reasonable attorne	ey fee to
Signed at		, OH this	day of,
Signed atCity		day	year
Witness Printed Name		Account Guarantor Printed Name	
Witness Signature		Account Guarantor Sigr	nature



BANK REFERENCE

C&M Truss LLC dba CMT Components 8319 Ashridge Arnheim Rd., Sardinia, OH 45171 office (937) 446-3400 fax 937-446-3449

Note to applicant: This form is to be filled out by the bank for account information. The applicant must sign the applicant's authorization at the bottom of the page and then return it to CMT Components to be forwarded to the bank.

DATE:	REGARDING:		
		credit account applicant	
TO:	name of bank		
ATTN:			
ACCOUNT NUMBER(S)			
		F Components. Since you have been named as their completing this form and returning it to us as soon as	
Date opened:		NSF history:	
Account balance:		Average balance:	
Account history:			
		Completed by:	
		Name:	
		Title:	
	APPLICANT'S AUTHORIZATION: (ple	ease fill in bank name and sign)	
hereby authorize			
		bank	
name to release the abo	ove information to C&M Truss LLC d l	ba CMT Components	
Applicant's signature		 Date	
Company title			