

## **CREDIT APPLICATION AND ACCOUNT AGREEMENT**

Name:  Business Name:  Address:  City State Zip Code + 4  Mailing Address:  City State Zip Code + 4  City State Zip Code + 4  Email:  Officers / Members / Managers / Owners  Name / Title:  Home Address:  Phone:  Sales Rep #  Date  Desired Credit Limit \$:  Contractor's License #:  State of Organization:  Federal ID #:  Phone:  Fax:  Officers / Members / Managers / Owners  SSN:  Phone:		
Business Name:  Address:  City State Zip Code + 4  Mailing Address: Street  City State Zip Code + 4  City State Zip Code + 4  Email:  Officers / Members / Managers / Owners  Name / Title:  Date  Desired Credit Limit \$:  Contractor's License #:  State of Organization: Federal ID #: Phone: Fax:  Officers / Members / Managers / Owners  SSN:		
Address:  Date  Desired Credit Limit \$:  Contractor's License #:  State of Organization:  Federal ID #:  Phone:  Fax:  Officers / Members / Managers / Owners  Name / Title:  Date  Desired Credit Limit \$:  Contractor's License #:  State of Organization:  Federal ID #:  Phone:  Fax:  Officers / Members / Managers / Owners  SSN:		
Desired Credit Limit \$:  Contractor's License #:  State of Organization:  Federal ID #:  Phone:  Fax:  Officers / Members / Managers / Owners  Name / Title:  Desired Credit Limit \$:  Contractor's License #:  State of Organization:  Federal ID #:  Phone:  Fax:  Officers / Members / Managers / Owners  SSN:		
Mailing Address: Street  City State  City Officers / Members / Managers / Owners  Name / Title:  State of Organization: Federal ID #: Phone: Fax:  Officers / Members / Managers / Owners SSN:		
City State Zip Code + 4  Email:  Officers / Members / Managers / Owners  Name / Title:  Federal ID #:  Phone:  Fax:  Officers / Members / Managers / Owners  SSN:		
City State Zip Code + 4  Email:  Officers / Members / Managers / Owners  Name / Title:  Phone: Fax:  Officers / Members / Managers / Owners  SSN:		
Officers / Members / Managers / Owners Name / Title:  Fax:  Officers / Members / Managers / Owners SSN:		
Officers / Members / Managers / Owners Name / Title:  Officers / Members / Managers / Owners SSN:		
Name / Title: SSN:		
	Officers / Members / Managers / Owners	
Home Address: Phone:	SSN:	
	Phone:	
Email:		
Name / Title: SSN:	SSN:	
Home Address: Phone:	Phone:	
Email:		
Banking Information Construction Loan Financing	Construction Loan Financing	
Name: Name:	Name:	
Bank Rep: Loan Rep:	Loan Rep:	
Email: Email:	Email:	
Direct Line: Direct Line:	Direct Line:	
Reference 1 Reference 2	Reference 2	
Business Name: Business Name:	Business Name:	
Contact: Contact:	Contact:	
Phone: Phone:	Phone:	
Email: Email:	Email:	
* Personal / Retail / Application Only Please Return To:	Please Return To:	
Construction Site Address: (fill out below)  AccountManagement@parr.c		

Phone: 503.614.2528

Street

City, State, Zip Code + 4

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The terms and conditions below are part of the application.  Credit Sales Policy	on for and agreed to by applican	it(ins	ert name of entity/individual)		
Credit Sales Policy  1. A signature below establishes acceptance of the terms and conditions set forth herein, without exception, and agreement to comply with these terms.  2. Any statement term or condition not contained in this Policy or approved and acknowledged in writing by an authorized representative of The Parr Company and/or any of its associated, affiliated, and subsidiary companies will not be part of the agreement between the parties.  3. All invoices due for payment by the 10th day of the month, following the month in which the purchase was made. If payment is not received by the 11th day of the month, the account will be past due. All prices are exclusive of, and the undersigned is responsible for, all sales, use, excise and like taxes, if any, and other governmental assessments.  4. The billing period generally closes on the 25th day of each month. Any transactions after that date will be included in the next month's statement  5. Past due balances are assessed a late charge of 1-1/2% per month (18% per annum), or the maximum rate allowed by law, whichever is lower. This late charge will be assessed on all past due accounts.  6. Past due accounts.  6. Past due accounts will be placed on a cash basis at The Parr Company's sole option.  7. In the event any account is not paid when due, the undersigned shall be liable for any and all fees and costs incurred in connection with a referral of this account to any third party or parties, including but not limited to all attorney's fees, plus interest on such costs and fees from the date paid by The Parr Company at the rate applicable to past due balances under this Credit Sales Policy. The undersigned agrees that if any suit or action is brought to enforce any part of the agreement, venue shall, at the sole option of The Parr Company, be in the appropriate state court in Multnomah County, Oregon; Clark County, Washington; Spokane County, Washington; or the court where a lien foreclosure action is commenced. This agreement, and an electronic transmission					
Name:	Title:	Name:	Title:		
Numer		Numer			
Signature:	Date:	Signature:			
Guaranty In consideration of, and in order to induce The Parr Company ("Parr") to extend credit to, or continue to extend credit to					
THIS AGREEMENT MADE AND SIGNED THISDAY OF (Signature must be as individuals - not as company or corporate officials)					
Name:		Name:			

Signature:

Signature: