



BAY CITY • STANDISH

APPLICATION FOR CREDIT

SEQUIN LUMBER COMPANY

3881 N. Euclid Ave., Bay City, MI 48706 • 989.684.9161

105 Cedar Street., Standish, MI 48658 • 989.846.9551

SECTION 1: PERSONAL INFORMATION

TODAY'S DATE: _____

LAST NAME: _____ FIRST NAME: _____ M.I. _____

STREET ADDRESS: _____

CITY/STATE/ZIP CODE: _____

CELL PHONE: _____ HOME PHONE: _____

EMAIL ADDRESS: _____

SOCIAL SECURITY #: _____ DATE OF BIRTH: _____

SECTION 2: BUSINESS ACCOUNT INFORMATION

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

CITY/STATE/ZIP CODE: _____

BUSINESS PHONE: _____ BUSINESS FAX: _____

YEAR ESTABLISHED: _____ TAX I.D. NUMBER: _____

PLEASE INDICATE THE TYPE OF BUSINESS:

____ CORPORATION

____ LLC

____ PARTNERSHIP

____ SOLE PROPRIETOR

____ TAXABLE

____ TAX EXEMPT

TAX EXEMPT NUMBER: _____

FOR TAX EXEMPT ACCOUNTS, A TAX EXEMPTION FORM MUST BE ON FILE.

ADDITIONAL PRINCIPALS OF THE BUSINESS

NAME: _____	TITLE: _____
ADDRESS: _____	
PHONE: _____	DATE OF BIRTH: _____
DRIVER'S LICENSE #: _____	SOCIAL SECURITY #: _____

SECTION 2: BUSINESS INFORMATION CONT.

NAME: _____	TITLE: _____
ADDRESS: _____	
PHONE: _____	DATE OF BIRTH: _____
DRIVER'S LICENSE #: _____	SOCIAL SECURITY #: _____

NAME: _____	TITLE: _____
ADDRESS: _____	
PHONE: _____	DATE OF BIRTH: _____
DRIVER'S LICENSE #: _____	SOCIAL SECURITY #: _____

WE ESTIMATE OUR MONTHLY CREDIT REQUIREMENTS FROM SEQUIN LUMBER COMPANY WILL BE: _____

SECTION 3: REFERENCES

BANK NAME: _____	
ADDRESS: _____	
PHONE: _____	CONTACT: _____

BUSINESS REFERENCE: _____	
ADDRESS: _____	
PHONE: _____	CONTACT: _____

BUSINESS REFERENCE: _____	
ADDRESS: _____	
PHONE: _____	CONTACT: _____

BUSINESS REFERENCE: _____	
ADDRESS: _____	
PHONE: _____	CONTACT: _____

SECTION 4: AUTHORIZED PURCHASERS

THESE INDIVIDUALS ARE AUTHORIZED TO CHARGE TO THE ACCOUNT

NAME: _____ PHONE NUMBER: _____
NAME: _____ PHONE NUMBER: _____
NAME: _____ PHONE NUMBER: _____
NAME: _____ PHONE NUMBER: _____
NAME: _____ PHONE NUMBER: _____

SECTION 5: EMAIL INVOICE/STATEMENT CONTACT INFORMATION

EMAIL INVOICES TO THESE ADDRESSES:

NAME: _____ EMAIL ADDRESS: _____
NAME: _____ EMAIL ADDRESS: _____
NAME: _____ EMAIL ADDRESS: _____

EMAIL STATEMENTS TO THESE ADDRESSES:

NAME: _____ EMAIL ADDRESS: _____
NAME: _____ EMAIL ADDRESS: _____
NAME: _____ EMAIL ADDRESS: _____

SECTION 6: TRUTH IN LENDING DISCLOSURES

FEDERAL TRUTH-IN-LENDING DISCLOSURES AGREEMENT:

YOUR SIGNATURE BELOW MEANS THAT YOU ASSUME RESPONSIBILITY FOR PAYMENT OF THIS ACCOUNT AND AGREE TO ALL CREDIT TERMS OF SEQUIN LUMBER COMPANY INC.'S INCLUDING SPECIFICALLY THE FOLLOWING:

ALL CHARGES WILL BE PAYABLE BY THE 25TH OF THE FOLLOWING MONTH. ON THE 26TH OF THE SAME MONTH ACCOUNTS WILL BE CONSIDERED DELINQUENT, CREDIT MAY BE SUSPENDED, AND THE APPLICANT AGREES TO PAY A FINANCE CHARGE ON ALL PAST DUE OBLIGATIONS. THE FINANCE CHARGE ON ALL PAST DUE BALANCES WILL BE IMPOSED AT A "PERIODIC RATE" OF 1½% PER MONTH (MINIMUM FINANCE CHARGE OF \$1.50) WHICH IS AN ANNUAL PERCENTAGE RATE OF 18% APPLIED TO THE PREVIOUS BALANCE LESS ANY PAYMENTS OR CREDITED RECEIVED PRIOR TO THE END OF THE BILLING CYCLE. NO FINANCE CHARGE WILL BE APPLIED IF THE FULL BALANCE IS PAID WITHIN THE ABOVE-MENTIONED TERMS. IN THE EVENT OF DEFAULT OR FAILURE TO PAY GOODS AND SERVICES SOLD AND DELIVERED PURSUANT TO THIS CREDIT APPLICATION, APPLICANT HEREBY AUTHORIZE SUCH CHARGE AND AGREES TO PAY ALL FINANCE CHARGES THE SAME AS ANY OTHER INDEBTEDNESS. APPLICANT HEREBY AGREES TO ABIDE BY EACH OF THE TERMS AND CONDITIONS SET FORTH ON ALL INVOICES, WHICH TERMS AND CONDITIONS MAY BE AMENDED FROM TIME TO TIME AND WHICH TERMS AND CONDITIONS ARE INCORPORATED HEREIN BY REFERENCE. APPLICANT HEREBY UNDERSTANDS AND AGREES THAT, SHOULD IT BECOME NECESSARY TO PLACE THIS ACCOUNT FOR COLLECTION, APPLICANT HEREBY OBLIGATES ITSELF/HIMSELF/HERSELF TO PAY ALL COSTS OF COLLECTION, INCLUDING BUT NOT LIMITED TO COLLECTION AGENCY FEES, REASONABLE ATTORNEY FEES, COURT COSTS, FILING FEES, INTEREST AND SERVICE

FEES WHICH MAY BE CHARGED IN THE EVENT OF DEFAULT OR FAILURE TO PAY FOR GOODS AND SERVICES PROVIDED. THIS AGREEMENT SHALL BE GOVERNED AND CONSTRUED IN ACCORDANCE WITH SUBSTANTIVE LAWS OF THE STATE OF MICHIGAN.

PAYMENTS, CREDITS OR CHARGES RECEIVED BEFORE THE 25TH DAY OF THE MONTH WILL BE REFLECTED ON THAT MONTH'S ACCOUNT STATEMENT. PAYMENTS, CREDITS OR CHARGES RECEIVED AFTER THE 25TH DAY OF THE MONTH WHICH IS CLOSING DATE OF BILLING CYCLE, WILL APPEAR ON THE NEXT MONTH'S STATEMENT.

SECTION 7: PERSONAL GUARANTEE

THE UNDERSIGNED, IN CONSIDERATION OF SEQUIN LUMBER COMPANY, INC. EXTENDING CREDIT TO THE APPLICANT(S) UPON THIS APPLICATION, JOINTLY AND SEVERALLY PERSONALLY GUARANTEE TO SEQUIN LUMBER COMPANY, INC. THE PROMPT PAYMENT OF ALL SUMS DUE TO SEQUIN LUMBER COMPANY, INC. BY THE ABOVE NAMED APPLICANT(S). GUARANTOR'S LIABILITY SHALL BE FOR THE FULL BALANCE DUE BY APPLICANT TO SEQUIN LUMBER COMPANY, INC. PURSUANT TO THIS OR ANY FUTURE EXTENSION OF CREDIT INCLUDING APPLICABLE INTEREST, COURT COSTS AND ATTORNEY FEES. GUARANTOR HEREBY EXPRESSLY WAIVES NOTICE OF AMOUNT OF SALES, DATES OF SHIPMENT OR DELIVERY AND WAIVES NOTICE OF ANY DEFAULT ON THE PART OF APPLICANT OR ANY EXTENSION OF TIME TO PAY OBLIGATIONS WHICH SEQUIN LUMBER COMPANY, INC. MAY GRANT, AND GUARANTOR DOES HEREBY CONSENT TO ANY AND ALL EXTENSIONS WHICH MAY BE GRANTED TO APPLICANT FROM TIME TO TIME. THERE SHALL BE NO OBLIGATION ON SEQUIN LUMBER COMPANY'S PART AT ANY TIME TO RESORT FOR PAYMENT TO APPLICANT OR RESORT TO ANY COLLATERAL SECURITY, PROPERTY, LIENS OR ANY OTHER RIGHTS OR REMEDIES WHATSOEVER AND SEQUIN LUMBER COMPANY, INC. SHALL HAVE THE RIGHT TO PROCEED AGAINST GUARANTOR IMMEDIATELY UPON ANY DEFAULT BY APPLICANT(S). NO TERMINATION OF THIS GUARANTEE SHALL BE EFFECTIVE EXCEPT THAT SENT TO SEQUIN LUMBER COMPANY, INC., BY CERTIFIED MAIL NAMING AN EFFECTIVE DATE AFTER THE DATE OF RECEIPT OF SAID NOTICE. SUCH TERMINATION SHALL NOT AFFECT LIABILITY OF THE UNDERSIGNED WITH RESPECT TO ANY CREDIT EXTENDED TO THE ABOVE-NAMED APPLICANT(S) PRIOR TO SAID TERMINATION DATE. GUARANTOR'S LIABILITY HEREUNDER SHALL NOT BE CANCELLED, NOR SHALL GUARANTOR BE RELEASED HEREUNDER IN CONSEQUENCE OF ANY COVENANTS, AGREEMENTS OR ACTS BY SEQUIN LUMBER COMPANY, INC. WITH APPLICANT(S). SEQUIN LUMBER COMPANY, INC. MAY ADD OTHER GUARANTORS FOR APPLICANT. THE ADDITION OF OTHER GUARANTORS BY SEQUIN LUMBER COMPANY, INC. SHALL NOT AFFECT THE OBLIGATIONS OF GUARANTOR AS SET FORTH HEREIN. THE DELETION OF ONE OR MORE GUARANTORS SHALL NOT AFFECT THE OBLIGATIONS OF ANY REMAINING GUARANTORS. THE RELEASE, DEATH, BANKRUPTCY OR OTHER ACTIONS THAT AFFECT EITHER THE CONTINUING OBLIGATION OF THE APPLICANT OR A CO-GUARANTOR WILL NOT AFFECT THE CONTINUING OBLIGATION OF ANY OTHER GUARANTOR(S). THE GUARANTOR HEREBY AUTHORIZES SEQUIN LUMBER COMPANY, INC. TO MAKE INQUIRY OF ANY RECOGNIZED SOURCE OF CREDIT INFORMATION CONCERNING THE CREDIT STANDING OF GUARANTOR. THIS PERSONAL GUARANTEE AGREEMENT SHALL BE GOVERNED OR CONSTRUED IN ACCORDANCE WITH THE SUBSTANTIVE LAWS OF THE STATE OF MICHIGAN.

_____	_____	_____
DATE	PERSONAL GUARANTOR (NO TITLES PLEASE)	ADDRESS
_____	_____	_____
DATE	PERSONAL GUARANTOR (NO TITLES PLEASE)	ADDRESS

SECTION 8: APPLICANT'S STATEMENT AND SIGNATURE

I GIVE MY PERMISSION TO SEQUIN LUMBER COMPANY, INC. AND IT'S SUBSIDIARIES AND AFFILIATES WHICH MAY INCLUDE CREDIT AGENCIES, TO VERIFY ALL GIVEN INFORMATION. I ALSO GIVE PERMISSION TO SEQUIN LUMBER COMPANY, INC. TO PERIODICALLY VERIFY ANY FINANCIAL INFORMATION, INCLUDING CREDIT AGENCIES, AT ANY TIME WHILE I MAINTAIN AN ACCOUNT AT SEQUIN LUMBER COMPANY, INC. OR OWE MONEY ON AN ACCOUNT AT SEQUIN LUMBER COMPANY, INC. I ALSO UNDERSTAND THAT ANY FALSE INFORMATION CONCERNING NAMES, ADDRESSES AND CORPORATION CONNECTIONS COULD BE CONSTRUED AS A FRAUDULENT STATEMENT.

APPLICANT'S SIGNATURE

DATE

NAME (PRINTED)

PLEASE NOTE THAT A COPY OF A VALID DRIVER'S LICENSE IS NECESSARY TO BEGIN PROCESSING THIS APPLICATION.

NOTIFY US IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR BILL OR STATEMENT

IF YOU THINK ANY BILL OR OTHER WRITTEN NOTICE STATING AN AMOUNT YOU OWE IS WRONG, OR IF YOU NEED MORE INFORMATION ABOUT A TRANSACTION ON YOUR BILL OR WRITTEN NOTICE, WRITE US AT THE ADDRESS SHOWN ON YOUR BILL, NOTICE OR INVOICE AS SOON AS POSSIBLE. WE MUST HEAR FROM YOU NO LATER THAN 60 DAYS AFTER WE SENT YOU THE FIRST BILL OR NOTICE STATING THAT YOU HAVE A BALANCE THAT IS PAST DUE. YOU CAN TELEPHONE US BUT DOING SO WILL NOT PRESERVE YOUR RIGHTS. IN YOUR LETTER, GIVE US THE FOLLOWING INFORMATION:

- YOUR NAME AND ACCOUNT NUMBER
- THE DOLLAR AMOUNT OF THE SUSPECTED ERROR
- DESCRIBE THE ERROR AND EXPLAIN, IF YOU CAN, WHY YOU BELIEVE THERE IS AN ERROR. IF YOU NEED MORE INFORMATION DESCRIBE THE ITEM YOU ARE UNSURE ABOUT

YOUR RIGHTS AND OUR RESPONSIBILITIES AFTER WE RECEIVE YOUR WRITTEN NOTICE

WE MUST ACKNOWLEDGE YOUR LETTER WITHIN 30 DAYS UNLESS WE HAVE CORRECTED THE ERROR BY THEN. WITHIN 90 DAYS, WE MUST EITHER CORRECT THE ERROR OR EXPLAIN WHY WE BELIEVE THE BILL WAS CORRECT. AFTER WE RECEIVE YOUR LETTER, WE CANNOT TRY TO COLLECT ANY AMOUNT YOU QUESTION, OR REPORT YOU AS DELINQUENT. WE CAN CONTINUE TO BILL YOU FOR THE AMOUNT YOU QUESTION, INCLUDING FINANCE CHARGES, AND WE CAN APPLY ANY UNPAID AMOUNT AGAINST YOUR CREDIT LIMIT. YOU DO NOT HAVE TO PAY ANY QUESTIONED AMOUNT WHILE WE ARE INVESTIGATING, BUT YOU ARE STILL OBLIGATED TO PAY THE PARTS OF YOUR BILL THAT ARE NOT IN QUESTION. IF WE FIND THAT WE MADE A MISTAKE ON YOUR BILL, YOU WILL NOT HAVE TO PAY ANY FINANCE CHARGES RELATED TO ANY QUESTIONED AMOUNT. IF WE DIDN'T MAKE A MISTAKE, YOU MAY HAVE TO PAY FINANCE CHARGES, AND YOU WILL HAVE TO MAKE UP ANY MISSED PAYMENTS ON THE QUESTIONED AMOUNT. IN EITHER CASE, WE WILL SEND YOU A STATEMENT OF THE AMOUNT YOU OWE AND THE DATE THAT IT IS DUE. IF YOU FAIL TO PAY THE AMOUNT THAT WE THINK YOU OWE, WE MAY REPORT YOU AS DELINQUENT.