

Application for Credit

All information held confidential.

Select the company or companies for which you are requesting credit.

- JMAC Resources
- JMAC: Ready Mix Division
- IHD Liquids
- IHD Solids
- On Site Maintenance



Accounting Office Address For All Above Listed Companies:
1505 N Miller St, Suite 260, Wenatchee, WA 98801
Phone: 509.423.7494
Fax: 509.423.7497

Business Name: _____

Billing Address: _____

A/P Phone: _____

A/P Contact: _____

Email: _____

Type of Business: _____

Years in Business: _____

Amount of Credit Requested: \$ _____

Indicate Tax Status: Corporation Proprietorship Partnership

Federal ID #: _____

Will transactions be taxable? **Y** or **N** Rentals/Resales? _____

If you are exempt from sales tax, provide tax number & copy of certificate showing issue date & expiration date or provide sales tax rate:

Sales tax rate you pay: _____ Tax Number: _____

Officers, Partners, Proprietor:

Title & Name: _____

Title & Name: _____

Title & Name: _____

Trade References: Please provide all information requested.

1) Name: _____

Address: _____

Phone: _____

Fax: _____

2) Name: _____

Address: _____

Phone: _____

Fax: _____

3) Name: _____

Address: _____

Phone: _____

Fax: _____

General Provisions: This request for credit and the information herein is a request for the extension of credit for commercial business use. The applicant authorizes the above named creditor to obtain a written or oral credit report from any credit reporting agency. The applicant further authorizes any bank or commercial business, with whom the applicant is doing or has done any type of business, to give any and all necessary information to the creditor which will assist creditor in the credit investigation. If credit is extended, I/We understand the terms of payment to be within 30 days of the date of invoice, unless other written terms are authorized by a duly appointed officer. Accounts extended beyond 30 days will accrue a fee equal to 1.5% of the unpaid balance per month. If account is placed for collection, I/We agree to pay all costs of collection, including reasonable attorney or collection fees on the unpaid debt so long as any said indebtedness is due and unpaid.

Signature: _____ Date: _____

Printed Name: _____