

Door Division 101 N. Interstate Dr. P.O. Box 551 Sikeston, Missouri 63801 Ph (573) 472-2121 Fax (573) 471-4070

*Credit Department Ph 573-472-2121 Ext. 34 Fax 573-471-4070

		API	PLICATION	V FOR CRI	EDIT		
COMPANY NAME:			ADDRES	SS:			
		State:					
FAX:		BUSINESS	TYPE: (check one)	Contractor ()	Distributor ()	Wal-Mart Contractor ()	l
NUMBER O	F YEARS IN BU	JSINESS:OWN	ER OR PRESIDEN	T:			_
	OVIDE THE FO	LLOWING INFORMAT SK.	ION. IT WILL BE	HELD IN CONFI	DENCE, AND	WILL BE USED ONL	Y TO ASSIST US
LIST FOUR	REFERENCES	WITH WHOM YOU CO	NDUCT A HIGH V	OLUME OF CRE	DIT BUSINESS	S:	
NAME:	NAME:		RESS:		CITY		_
TATEPHON		PHONE	FAX		· ·		_
NAME:		ADD	RESS:		CITY	-	_
STATE	ZIP	PHONE	FAX				_
NAME:		ADD	RESS:		CITY		_
STATE	ZIPPHONE			FAX			_
NAME:		ADD	RESS:		CITY	Υ	
STATE	ZIP	PHONE		FAX			_
AMOUNT C	OF CREDIT REQ	UESTED:					
PURCHASE	ORDER REQU	IRED: YES() NO())				
*Please cont	act credit depai	tment at number listed a	above if you have q	uestions or comn	nents concernir	ng this application.	
from the above are net 30 days day, at a rate of such 3 rd party of	e listed references, s. I/we agree to pay f 1% per month un collections become	I/We certify that the informa and credit bureaus, or other s Steward Steel, Inc. within te til paid. Such unpaid invoice necessary, I/We agree to pay and consent to the jurisdiction	ources necessary to pro orms as stated. I/We ago of significant in ago of all related collection of	operly evaluate credi gree any invoice not e will, at Steward Ste costs, attorney fees,	it risk. Further, we paid within 60day eel Inc.'s discretion	e understand <u>Steward Ste</u> s will be subject to intere n, be subject to 3 rd party of	el, Inc.'s credit terms st beginning the 61 st collections. Should
PRINT NA	ME:		TITLE:_				
SIGNED: _				DATE:			

Steward Sales Contact: