

PLEASE PRINT:

ALPINE LUMBER SILVERTHORNE 240 S. Adams Avenue SILVERTHORNE, CO 80498 ph 970.485.7020 | fax 970.485.7019 creditapps_silverthorne@alpinelumber.com

Initial ___

CREDIT APPLICATION

The party indicated below and the individual(s) providing personal guarantees (collectively 'Customer') acknowledge that the information and agreement set forth below are submitted in order to induce Alpine Lumber Company or any affiliated entity (collectively 'Alpine') to provide building materials and supplies on contract and/or open account. Customer warrants that all information provided is true and correct and that Customer is solvent, in good standing and able to pay for all materials and building supplies ordered, irrespective of the acts or omissions of third parties. Customer acknowledges that Alpine is relying on the information and warranties provided by Customer. Customer agrees to promptly provide any further financial or other information requested by Alpine. Any signatory expressly warrants that he or she has all requisite authority to act for Customer.

Legal Business Name:							
Trade Name:	Email:						
Address 1:							
Address 2:							
City: State: Zip: _		Phone: ()	Fax: ()			
Type of business:	Years	in business under this name:	Years in busines	s in your state:			
☐ Personal Acct ☐ Corporate ☐ LLC ☐ Gene	eral Partnership	☐ Limited Partnership	☐ Sole Proprietorship	Government			
PRINCIPALS - List Names, Addresses, Phone #s, and So	ocial Security #s	of all Principals (use separate	page if necessary to add r	more)			
Name: Phone: (me:Phone: ()		Phone: ()				
Ēmail:				Email:			
Address:		Address:					
y: State: Zip:		City:	State: Zip:				
Position:SSN#:	SSN#:		SSN#:				
AUTHORIZED EMAIL ADDRESS(ES) - Required	to receive mont	hly billing statement and for	account information ac	cess			
Name/Title:							
Name/Title:							
TRADE REFERENCES - Please include all lumber yar	d accounts						
Name:)	Fax: ()				
Name:	Phone: ()	Fax: ()				
Name:	Phone: ()	Fax: ()				
COMMERCIAL BANK INFORMATION							
Bank Name: Acct	#:	Phone: ()	Fax: ()			
Alpine Yard location(s) where account will be used:							
Will you issue a purchase order for each purchase? ☐Yes	\square No						
f tax-exempt, please list tax numbers: State:		City:					
Reason for tax exemption:							
Has this business, applicant, or any individuals listed above e			garnishment filed against	it or the applicant?			
□Yes □No If yes, when:			gament mod agamet	Is and apprount:			

TERMS AND CONDITIONS

All dealings and purchases shall be subject to the following terms and Alpine standard terms and conditions of sales. Alpine reserves the right, in its sole discretion, to accept or reject orders and to continue or terminate the customer relationship at any time. Purchases made on account are due in full on the 10th of the month following the statement end date. Alpine reserves the right to modify or change terms at its sole discretion. Customer's billing and account information are made available via the internet. Customer has the affirmative responsibility to provide Alpine with an email address for billing purposes, obtain log-in credentials for its account and to view bills, statements and account information by way of internet. Customer may be charged an administrative fee if Customer requests and Alpine agrees, in its sole discretion, to provide any requested billing or information other than as provided via internet. Bills displayed via internet account are due and payable as set forth above whether or not separate bills are transmitted. In the event of Customer payment default, Alpine shall be entitled to collect from Customer all costs of collection, including attorneys' fees, and interest at the rate of 1.5% per month, both before and after judgment. Payments that identify a particular invoice or project will be applied to that particular invoice or project. Absent such identification, or in the event of payment default, Alpine reserves the right in its sole and absolute discretion (subject to applicable law) to apply payments to any unpaid account of Customer as determined by Alpine. In the event of error, discrepancy or defect in any items provided by Alpine, Customer's sole remedy shall be to require Alpine to correct the error, discrepancy or defect and Alpine shall have no liability for any other loss, damage or liability of Customer relating to such error, discrepancy or defect, including consequential damages, all of which are expressly waived. Customer warrants and represents that the materials and products supplied by Alpine or its affiliates, now or in the future, are not supplies for use in connection with the construction, maintenance or operation of any property or facility that grows, manufactures, distributes or sells marijuana or marijuana-based products.

The undersigned individual, who is either a principal of the applicant or a sole proprietor, understands and agrees that his or her individual credit history may be a factor in the evaluation of the credit history of the applicant, and hereby consents to and authorizes the use of the consumer credit report on the undersigned by Alpine Lumber Company and any of its authorized employees, from time to time as may be needed, in the evaluation or collection process.

Signature PRINT Name/Title:			Date:			
		5	Social Security #: Date of Birth:			
Email:						
Address:			City:		State:	Zip:
MUST BE SIGNE	D BY AN OWNER (OR OFFICER				
		PERSO	NAL GUAR	ANTY		
In consideration of	f Alpine Lumber Co	mpany, having sold,	or agreeing to se	ell, building mate	rials and sup	oplies to
					(Cus	tomer)
pay for all purchas	ses and the accoun		er with finance cha	arges, attorney's	fees and co	be responsible for and to be pursuant to the term ases.
been paid in full, v	which revocation sh	all be effective only	as to building ma	aterials and supp	olies sold to	and all amounts due have customer after written no y, Suite 350, Westminster
personal guaranty report on the under	and in the evaluations and in the evaluation	on of continued sale Lumber Company, f	es, and hereby co from time to time	ensents to and a as may be need	uthorizes the	or in the evaluation of this e use of a consumer credity aluation or collection protests may also be made.
PRINT Name:				[)ate:	
	Date of Birth:					
Signature:			Email:			
Home Address: _						
City:				State:	Zip:	
		FOR	OFFICE USE ONL	Y		
1,4,4,6,4	0.45					
WHS#		T/C				
CUST TYPE	TAX C	TAX?	REASON			

MANAGER'S SIGNATURE



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VERIFICATION OF DEPOSIT

Note for applicant: Please complete this request form for release of bank reference. Sign the applicant's authorization and return it to Alpine Lumber with your completed credit application. If the applicant's bank is **BANK OF AMERICA, KEY BANK, US BANK, VECTRA,** or **WELLS FARGO**, please take this to your bank for them to fill out. (These banks will not release information to us)

PLEASE PRINT	
DATE:	REGARDING:
TO (BANK):	APPLICANT'S COMPANY NAME
BANK REP () BANK REP PHONE#	PRINCIPAL'S NAME
PANK DED EMAK	COMPANY ADDRESS
BANK ACCT#:	
APPLICANT'S AUTHORIZATION (please fi	ill in bank name and sign)
I hereby authorizeCompany.	Bank to release the above information to Alpine Lumber
APPLICANT'S SIGNATURE	DATE
COMPANY TITLE	
THIS SECTION	TO BE FILLED OUT BY BANK
	lit with Alpine Lumber Company. Since you have been named your assistance by completing this portion and returning it to ble. Thank you.
DATE OPENED:	COMPLETED BY:
ACCOUNT BALANCE:	PRINT NAME
AVERAGE BALANCE:	
ACCOUNT HISTORY:	PRINT TITLE
NSF HISTORY:	-