



Credit Application

~ Contact Options ~
Fax: 573-378-5377 (Phone: 573-378-2580)
Email: sales@goodsmillwork.com
USPS: Good's Millwork
17717 Hwy K
Versailles, MO 65084

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Shipping Address:

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Sole Proprietorship Partnership Corporation

Name of Owner, Partner, or Senior Corporate Officer: _____

Years in Operation: _____ Federal ID# _____

Purchasing Contact: _____

Phone: _____ Fax: _____

Purchasing Contact: _____

Phone: _____ Fax: _____

Purchasing Contact: _____

Phone: _____ Fax: _____

Purchasing Contact: _____

Phone: _____ Fax: _____

Accounts Payable Contact: _____

Phone: _____ Fax: _____

PLEASE MARK MY ACCOUNT COD, (All COD accounts prepay 50% on special order and remainder upon pickup, Please sign below)

References

1) Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **Fax:** _____

2) Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **Fax:** _____

3) Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **Fax:** _____

Bank Reference

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **Fax:** _____

Contact: _____

Loans Information: Bank Name _____

Loan Representative's Name _____

Phone: _____ **Fax:** _____

Finance charges billed at 1 1/2 % on invoices over 30 days.

Anticipated Volume: \$ _____

I accept all terms and permit the above information to be used for credit reference. And agree to all Payment Terms.

X _____
Signature of Owner, Pres. or Controller Title Date