



615-255-1900
Fax 615-242-3064

DATE _____

APPLICANT: _____ FIRM'S LEGAL NAME: _____ TELEPHONE # _____

STREET ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____

BILLING ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____

PARENT COMPANY: _____ CITY: _____ STATE: _____ ZIP CODE: _____

TYPE OF BUSINESS: _____ CONTRACTOR'S LICENSE NUMBER: _____ TYPE: _____

DATE BUSINESS STARTED: _____ ESTIMATED ANNUAL SALES: _____ NUMBER OF EMPLOYEES : _____

ESTIMATED MONTHLY PURCHASES REQUESTED: _____ PURCHASE ORDERS REQUIRED () YES () NO IF TAX EXEMPT, INDICATE EXEMPTION NUMBER: _____ A COPY OF THE EXEMPTION CERTIFICATE MUST BE ON FILE AT THE TIME OF PURCHASE BEFORE EXEMPTION WILL BE ALLOWED.

BUSINESS PROPERTY IS : LEASED _____ OWNED _____ IF OWNED, BY WHOM _____ IF LEASED, FROM WHOM _____

IS YOUR HOME RESIDENCE: OWNED _____ RENTED _____ HOW LONG AT THIS ADDRESS: _____ HAVE YOU EVER FILED FOR BANKRUPTCY PROTECTION? _____ WHEN? _____ WHAT CHAPTER _____

OTHER EMPLOYMENT: _____ LOCATION: _____

BUSINESS IS: CORPORATION _____ PARTNERSHIP _____ SOLE PROPRIETORSHIP _____ LIMITED LIABILITY CO _____

FULL NAME OF OWNER OR OWNERS: LIST COMPLETE HOME ADDRESS AND SOCIAL SECURITY NUMBER

NAME STREET ADDRESS CITY STATE ZIP CODE

1. _____

SS#: _____ DRIVERS LICENSE #: _____

2. _____

SS#: _____ DRIVERS LICENSE #: _____

(FOR CORPORATION) FEDERAL TAX NUMBER: _____ STATE INCORPORATED: _____ CORPORATE ID #: _____

AN AUTHORIZED OFFICER OF CORPORATION: _____

CURRENT TRADE REFERENCES

	NAME	ADDRESS	CITY	STATE	ZIP	TELEPHONE NUMBER	ACCOUNT NUMBER
1.							
2.							
3.							
4.							
5.							

BANK REFERENCES

NAME	ADDRESS	CITY	STATE	ZIP	TELEPHONE	ACCOUNT NUMBER
1.						
2.						
3.						

ACCOUNT TERMS AND PERSONAL GUARANTY

Please sell and deliver to: Name of Company: _____ or their representatives, terms of sale as stated on invoices, such goods, wares, and merchandise as they or their representatives may order or select, and in consideration thereof the undersigned hereby fully guarantees and holds itself personally responsible for the payment at maturity of the purchase price and all such goods, wares, and merchandise sold and waives notice of acceptance hereof, amount of sales, dates of shipments or deliveries, notice of default in payment and legal proceedings against the purchaser.

This is intended to be and shall be construed to be a continuing personal guaranty applying to all sales made by you to the aforesaid, and shall not be revoked by the death of the guarantor(s) but shall remain in full force and effect until the undersigned or its administrators shall give notice in writing to make no further advances on the security of the guaranty, and until such notice shall have been received by you. The Undersigned also waives all requirements of notice, demand, presentment or protest in case of any default by Purchaser and any right which the undersigned might otherwise have required against you or against any co-guarantor or any other person or first to realize on any security held by it before proceeding against the undersigned for the enforcement of this guaranty.

It is understood and agreed that there is no limit to the undersigned's liability under the Guaranty.

If there be more than one guarantor executing this guaranty, their obligation hereunder shall be joint and several. In that case the word "Undersigned", shall be deemed to apply against each guarantor and you shall be entitled to full recovery of the obligation of this guaranty against each, but shall retain only one satisfaction.

The undersigned hereby agrees to the terms of sale, which are stated on each invoice. Cash discounts are earned if payment is received by the 10th of the month following purchase, NET thereafter and becomes past due if not paid by the end of that month, and further 1 1/2% service charge (not to exceed the legal limit) will be added to any past due portion that becomes thirty (30) days past due. Sixty days (60) from the last day of the month in which we provided materials a "Notice of Non-Payment" will be sent via certified mail, return receipt requested to secure our lien rights on all unpaid invoices as prescribed by the Tennessee Code Annotated 66-11-145. In the event of default in payment and if the same is placed with an attorney for collection, the undersigned agrees to pay all cost of collection, including a reasonable attorney's fee; and the undersigned does hereby certify that the information contained above is true and correct. The undersigned further agrees that any changes in ownership or officers or form that the business operates as shall be made known to us. This notice shall be timely and in writing and mailed to METRO READY MIX CONCRETE, 1136 SECOND AVENUE, NORTH, NASHVILLE, TN 37208. By signing below, permission is granted to access your credit information (business/personal) through the Credit Bureau Systems and contacting credit references. This information is needed in determining whether credit will be extended.

If you have an invoice that you believe is in error, we must receive your disputed information IN WRITING no later than thirty days (30) from the date of the invoice on which the error occurred. Please notify, in writing, to Metro Ready Mix Concrete 1136 Second Ave. North, Nashville, TN 37208. If notification is not received within 30 days from the date of the invoice, it is assumed to be correct and must be paid within our terms.

The undersigned agrees to indemnify Metro Ready Mix Concrete against all claims arising out of defective finishing or deterioration of the concrete caused by added water or other intervening causes.

To expedite the application, you have asked us to accept your faxed signature and have agreed this will be considered as good as your original signature and admissible in court as conclusive evidence of this credit application.

Signed this _____, _____, 20____.

Authorized Signature of Personal Guarantor

e-mail address: _____