



CREDIT APPLICATION

CONTACT INFORMATION

CONTACT NAME

CONTACT TITLE

CONTACT EMAIL

PHONE

OFFICE USE ONLY

ACCOUNT #

DATE

APPROVED BY

COMPANY INFORMATION

COMPANY NAME

ORGANIZATIONAL STRUCTURE (CHECK ONE)

☐ CORPORATION

☐ PARTNERSHIP

☐ SOLE PROPRIETORSHIP

MAILING ADDRESS

MAILING CITY

MAILING STATE

MAILING ZIP CODE

DELIVERY ADDRESS

DELIVERY CITY

DELIVERY STATE

DELIVERY ZIP CODE

FEDERAL TAX ID#

DATE OF INCORPORATION

PRINCIPAL INFORMATION (IF SOLE PROPRIETORSHIP)

NAME

D.O.B.

SOCIAL SECURITY #

ADDRESS

CITY

STATE

ZIP CODE

HAVE YOU EVER FILED FOR BANKRUPTCY?

☐ YES

☐ NO

ACCOUNT INFORMATION

1. BANK NAME

ACCOUNT #

2. BANK NAME

ACCOUNT #

TRADE REFERENCES

1. COMPANY NAME

ADDRESS

CITY

STATE

ZIP

PHONE

2. COMPANY NAME

ADDRESS

CITY

STATE

ZIP

PHONE

3. COMPANY NAME

ADDRESS

CITY

STATE

ZIP

PHONE

INVOICING PREFERENCES

PURCHASE ORDERS REQUIRED?

☐ YES

☐ NO

PREFERRED INVOICE METHOD

☐ MAIL

☐ EMAIL

PREFERRED PAYMENT METHOD

☐ CHECK

☐ ACH

☐ CREDIT CARD

PAYABLES CONTACT NAME

TITLE

PHONE

EMAIL ADDRESS

ACCOUNT AGREEMENT AND TERMS

The undersigned hereby applies to BuildingPoint Florida, LLC ("BuildingPoint Florida") on behalf of the company listed on this credit application and is either an officer or an approved signer for said company. It is understood that your company consents to BuildingPoint Florida investigating its credit history for the purpose of extending credit. If credit is extended, your company acknowledges that BuildingPoint Florida's credit terms are payment in full in net thirty days from the date of invoice unless stated otherwise in the aforementioned agreement. In the event your company fails to timely pay any invoice, it agrees to pay a late fee to BuildingPoint Florida on such delinquent invoice until same is paid, at 1.5% a month (18% annum). Also if it becomes necessary to effect collection, your company waives the right to a venue outside of Hillsborough County, as well as the right to a trial by jury and agrees to pay reasonable court costs and attorney's fees.

SIGNATURE

TITLE

PRINT NAME

DATE