

520-A Crazy Horse Canyon Road • Salinas, CA 93907-8434 • (831) 443-8644 • FAX (831) 443-9578

APPLICATION FOR CREDIT

AME OF FIRM OR INDIVIDUAL			YEARS IN I	BUSINESS
AILING ADDRESS				
YSICAL ADDRESS			YEARS AT	THIS ADDRESS
TY	STATE	ZIP	AREA COD	E/PHONE
AIL ADDRESS				
	applies for credit in accordance	e with the terms and co	nditions of:	
520-A CRA	ASSURED AGGREGATES ZY HORSE CANYON ROAD PHONE: (831) 443-8644 F	O, SALINAS, CALIFO	DRNIA 93907	
e following information must be provide	d. It will be held in the strictest	confidence.		
Corporation (O Check here if incorpor	ated within the past 12 months)	☐ Partnership	☐ Individual	☐ Other
payer Information Number:	·			
NERS/OFFICERS				
Name of Principal	Title	Home Address		
Telephone	Cell Phone	Driver's	License Number	State Issued
Name of Principal	Title	Home Address		
Telephone	Cell Phone	Driver's	License Number	State Issued
Name of Principal	Title	Home Address		
	Cell Phone	Driver's	License Number	State Issued
Telephone				
Telephone				
Telephone Agent for Service of Process		Address		
Agent for Service of Process				
Agent for Service of Process				
Agent for Service of Process	Bank Address		Account#	
Agent for Service of Process JANCE		Address		□Ves □Ne
Agent for Service of Process [ANCE] Bank		Address	Account#	□Yes □No
Agent for Service of Process ANCE Bank Bank Officer or Department	Bank Address	Address Have you e		□Yes □No
Agent for Service of Process NANCE Bank Bank Officer or Department	Bank Address Telephone	Address Have you e		□ Yes □ No

CREDIT REFERENCES		
1		
Business Name	Address	
Contact	Telephone	Account Number
2.		
Business Name	Address	
Contact	Telephone	Account Number
3.		
Business Name	Address	
Contact	Telephone	Account Number
☐ Check here if cash sales are okay until credit is	approved.	e if resale (must have resale information on file).
ASSURED AGGREGATES COMPANY, INC.	TERMS OF CREDIT	
	1	
Customer continues that all the information on this form		this application and disclosure of terms as Customer. the terms on behalf of Customer has the authority to agre
		nc.'s ("Assured") credit and payment terms as follows:
and onld customer. Customer understands and accep	ts Assured Aggregates Company, I	ic. s (Assured) credit and payment terms as follows.
PAYMENT TERMS:		
1. Invoices and/or Freight bills shall be issued elect	onically to the email address identification	ed above, as services are rendered, or materials are
dispatched for delivery.	64	
2. Payment is due within thirty (30) days of the date		ot have abared will include travel time healt to the main
		nt, hours charged will include travel time back to the point will impose a finance charge if the total amount due as
-		voice or freight bill. The finance charge is computed based
		. This periodic rate is an annual percentage rate of
		is the previous balance less any payments and credits.
4. If Customer fails to pay an invoice plus accrued in		
		or in Customer's entity status, addresses, phone numbers
		ch change. Failure to do is a breach of the agreement.
6. ATTORNEY FEES AND COURT COSTS: In		
		the event suit is commenced, the Customer shall be
responsible for the payment of all costs of collect		
		re being delivered, only one signature of Customer is
deemed signed and all terms stated applicable to		tomer agrees for each load that the delivery tag will be
WARNING: Aggregate products, i	ncluding but not limited to sand	gravel, asphalt, natural and other earth products,
		known to the State of California to cause cancer.
		dition crude oil, gasoline, diesel fuel, and other
petroleum products can expose you to che	micals, including toluene and be	enzene, which are known to the State of California
to cause cancer and birth defects or other	reproductive harm. Exposure ca	n occur from contact with, by breathing the air or
		uipment used to handle, manufacture, assemble,
transport and place the product. For more	nformation go to: www.P65Wa	rnings.ca.gov/petroleum.
		undersigned certifies that the information provided on this
	d obtaining a credit report and other re	elevant credit information as consideration for Assured's
initial grant of credit to Customer.		
Applicant / Company Name		Date
Company Address and Telephone Number		
Authorized Signature	Print Name and Title	