



ABC BLOCK CO. | 6902 BRODIE LANE | LITTLE ROCK, AR 72204
www.abcblock.com | Phone: 501-455-2027 | Fax: 501-455-4511

CREDIT APPLICATION

Company Name: _____ Phone #: _____ Fax #: _____
Mailing Address: _____ Shipping Address: _____
City: _____ City: _____
State: _____ Zip: _____ State: _____ Zip: _____
Contact Person: _____ Email address: _____
Physical Street Address: _____ Mobile #: _____

Individual Corporation Partnership Years Incorporated: _____ Federal ID #: _____
Company Owners or Officers:

Name: _____ Title: _____ SSN: _____
Home Address: _____ City: _____ State: _____ Zip: _____
Driver's License #: _____ Car Make: _____ Model: _____ License Plate #: _____
Name: _____ Title: _____ SSN: _____
Home Address: _____ City: _____ State: _____ Zip: _____
Driver's License #: _____ Car Make: _____ Model: _____ License Plate #: _____

Banking References:

Bank Name: _____ Phone Number: _____
Address: _____ City: _____ State: _____ Zip: _____
Account Officer: _____ Account #: _____ Loan #: _____

Trade References:

Company Name: _____ Phone #: _____
Company Name: _____ Phone #: _____
Company Name: _____ Phone #: _____

Salesman or Who Referred You? _____

Requested Credit Limit? _____ If credit is not extended, do you wish to have a Cash Only Account? Yes

A LATE CHARGE OF 10% WILL BE CHARGED TO ALL INVOICES OVER 60 DAYS. I CERTIFY THAT EVERYTHING I HAVE STATED IN THIS AND ANY ATTACHMENTS IS CORRECT AND TRUE. ABC BLOCK CO. MAY KEEP THIS APPLICATION WHETHER IT IS APPROVED OR DECLINED. ANY FALSE STATEMENTS COULD BE UNDER PENALTY OF LAW. I UNDERSTAND THAT I AM **PERSONALLY** RESPONSIBLE FOR THIS DEBT. BY SIGNING, I AUTHORIZE YOU TO CHECK MY CREDIT, BANKING AND EMPLOYMENT HISTORY AND TO ANSWER ANY QUESTIONS OTHERS MAY ASK ABOUT YOUR CREDIT INFORMATION. I UNDERSTAND THAT IF THIS ACCOUNT BECOMES DELINQUENT, ANY AND ALL COLLECTION CHARGES WILL BE CHARGED BACK TO ME. BY SIGNING THIS AGREEMENT, I AGREE TO THE ABOVE, AS WELL AS, VENUE AND JURISDICTION FOR ANY AND ALL COLLECTIONS TO BE IN THE COUNTY OF PULASKI IN THE STATE OF ARKANSAS.

(X) Signature: _____ (X) Print Name: _____

PLEASE BE AWARE INCOMPLETE APPLICATIONS WILL BE REJECTED. YOU MAY SUBMIT A CREDIT REFERENCE SHEET IN PLACE OF THE BANKING AND TRADE REFERENCE SECTIONS. ALL OTHER SECTIONS MUST BE COMPLETED IN THEIR ENTIRETY FOR THE APPLICATION TO BE ACCEPTED BY ABC BLOCK. IF THE CREDIT AUTHORIZATION OR PERSONAL GUARANTEE ARE MARKED OUT, WE WILL BE UNABLE TO PROCESS YOUR APPLICATION.