



BRANCH _____
SALESMAN # _____

15 PROFESSIONAL PARKWAY
HATTIESBURG, MS 39402

TEL: (601) 264-2962
FAX: (601) 296-4792

CREDIT APPLICATION & CUSTOMER INFORMATION
INCOMPLETE INFORMATION WILL CAUSE DELAYS...PLEASE COMPLETE IN FULL

NAME _____ PHONE (____) _____
(AS REGISTERED WITH STATE DEPT. OF TAXATION) FAX (____) _____
MAILING ADDRESS: _____

(CITY) (STATE) (ZIP CODE) (STREET) (P.O. BOX)

SHIPPING ADDRESS: (IF DIFFERENT)

(CITY) (STATE) (ZIP CODE) (STREET) (P.O. BOX)

LINE OF BUSINESS: _____ YEAR BUSINESS ESTABLISHED _____
LINE OF CREDIT REQUESTED: \$ _____ SALES TAX EXEMPTION # _____
(PLEASE FURNISH CERTIFICATE)

FEDERAL ID # _____ (CORPORATION)

OWNERSHIP: CORPORATION PARTNERSHIP PROPIETOR

PRESIDENT, PARTNER OR OWNER _____ HOME PHONE _____ SOCIAL SECURITY NUMBER _____

RESIDENCE ADDRESS _____

PRESIDENT, PARTNER OR OWNER _____ HOME PHONE _____ SOCIAL SECURITY NUMBER _____

RESIDENCE ADDRESS _____

TRADE REFERENCES: INCOMPLETE INFORMATION WILL CAUSE DELAYS.

SUPPLIER _____ PHONE _____ FAX _____

SUPPLIER _____ PHONE _____ FAX _____

SUPPLIER _____ PHONE _____ FAX _____

SUPPLIER _____ PHONE _____ FAX _____

BANK:

NAME _____ PHONE _____ BANKER CONTACT _____
CHECKING ACCOUNT # _____

ADDRESS (STREET OR P.O. BOX) _____
LOAN ACCOUNT # _____

CITY _____ STATE _____ ZIP _____

TERMS AND SIGNATURE

I hereby authorize the above bank to disclose any and all information necessary for the completion of this Credit Application to McEwen Lumber Company. NOTE: THE "BANK AUTORIZATION" IS NECESSARY IN ORDER FOR IS TO OBTAIN THE NECESSARY INFORMATION FROM YOUR BANK.THANK YOU.

"UPON ACCEPTANCE OF YOUR APPLICATION FOR CREDIT AND UPON OUR SHIPPING OF GOODS TO YOU UPON CREDIT TERMS, YOU AGREE TO BE BOUND BY THE TERMS OF THE INVOICE OR STATEMENT, AND FURTHERMORE, THAT IN THE EVENT THAT MCEWEN LUMBER COMPANY IS REQUIRED TO TAKE LEGAL ACTION IN ORDER TO RECOVER ANY MONIES THAT MAY BE DUE UNDER THIS EXTENSION OF CREDIT, YOU AGREE THAT IT SHALL BE ENTITLED TO RECOVER ALL COST AND FEES INCURRED THEREIN, INCLUDING A REASONABLE ATTORNEY'S FEE AT BOTH THE TRIAL AND APPELLATE LEVELS.PST DUE BALANCES ARE SUBJECT TO A 1.5% PER MONTH SERVICE CHARGE.THIS IS AN APR OF 18%. THIS AGREEMENT SHALL BE DEEMED TO BE A CONTRACT UNDER THE LAWS OF THE STATE OF MISSISSIPPI, AND FOR ALL PURPOSE SHALL BE CONSTRUED IN ACCORDANCE WITH THE LAWS OF SAID STATE.

YOUR SIGNATURE ACKNOWLEDGES REQUEST FOR THE EXTENSION OF CREDIT ON THE ABOVE TERMS AND CONDITIONS AND SIGNIFIES YOUR AGREEMENT TO SUCH. BY MY/OUR SIGNATURE(S) I/WE HEREBY AUTHORIZE AND GIVE PERMISSION TO MCEWEN LUMBER CO. TO RUN FULL INVESTIGATION OF MY/OUR CREDIT HISTORY, INCLUDING, BUT NOT LIMITED TO, OBTAINING A CONSUMER REPORT

SIGNATURE DATE TITLE

HOOD DISTRIBUTION, INC STANDARD GUARANTEE

TO INDUCE HOOD DISTRIBUTION, A DIVISION OF HOOD INDUSTRIES TO SELL MERCHANDISE AND EXTEND CREDIT TO

THE UNDERSIGNED HEREBY JOINTLY AND SEVERALLY GURANTEE THE PAYMENT OF ANY INDEBTEDNESS IN AN AMOUNT NOT TO EXCEED \$ _____ WHICH MAY AT ANY TIME AND FROM TIME TO TIME BE INCURRED BY SAID CORPORATION TO HOOD DISTRIBUTION: AND IN THE EVENT OF ANY DEFAULT AT ANY TIME BY SAID CORPORATION HOOD DISTIBUTION SHALL BE ENTITLED TO LOOK TO US IMMEDIATELY FOR SUCH PAYMENT, WITHOUT PRIOR DEMAND OR NOTICE.

THIS GUARANTEE SHALL CONTIUE IN FULL FORCE AND EFFECT UNTIL _____, OR SUCH TIME AS HOOD DISTRIBUTION SHALL RECEIVE WRITTEN NOTICE VIA REGISTERED MAIL OR REVOCATION OF THIS GUARANTEE. SUCH NOTICE OF REVOCATION SHALL BE INEFFECTIVE AS TO ANY EXSITING INDEBTEDNESS OR AS TO ANY TRANSACTION OR COMMITMENT PREVIOUSLY UNDERTAKEN BY HOOD DISTRIBUTION BEFORE HOOD DISTRIBUTION IS IN RECEIPT OF SUCH WRITTEN NOTICE OF REVOCATION.

DATED THIS _____ DAY OF _____ 20_____.

(Individually)

_____ Signature

_____ Print

(Individually)

_____ Signature

_____ Print

STATE OF _____)

COUNTY OF _____)

ON THIS _____ DAY OF _____, 20_____, BEFORE ME THE UNDERSIGNED, A NOTARY PUBLIC FOR THE STATE OF _____, PERSONALLY APPEARED _____ AND, KNOWN TO ME TO BE THE PERSON WHOSE NAME IS SUBSCRIBED TO THE WITHIN INSTRUMENT AND ACKNOWLEDGED TO ME THAT SAID PERSON EXECUTED THE SAME.

IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AND AFFIXED MY SEAL THE DAY AND YEAR FIRST ABOVE WRITTEN.

NOTARY PUBLIC, STATE OF _____

RESIDING AT _____

COMMISSION EXPIRES

PLEASE FURNISH BALANCE SHEET AND INCOME STATEMENT.