

**HMI CREDIT APPLICATION**

**PLEASE MAKE SURE TO**

**FAX THE FOLLOWING**

**CREDIT APPLICATION**

**TO**

**517-456-6346**

**ATTN: SUSAN RICHARDSON**

**THANK YOU!**



HARDWOODS OF MICHIGAN, INC.  
430 Division Street, P.O. Box 334  
Clinton, MI 49236  
Phone: 517-456-7431 Fax: 517-456-6346

## CUSTOMER CREDIT APPLICATION

### *Customer Information Section*

Company Name: \_\_\_\_\_  
Billing Address: \_\_\_\_\_ City \_\_\_\_\_ St/Zip \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Contact: \_\_\_\_\_  
SHIP TO ADDRESS: \_\_\_\_\_ City \_\_\_\_\_ St/Zip \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Contact: \_\_\_\_\_  
Delivery Hours: \_\_\_\_\_ A/P Contact: \_\_\_\_\_  
Type of business: 1. Corporation 2. Partnership 3. Sole Proprietor Sales Tax ID # \_\_\_\_\_  
Line of work company is in: \_\_\_\_\_  
President/Owner Name: \_\_\_\_\_ Chief Financial Officer: \_\_\_\_\_  
Will you make financial statements available? \_\_\_\_\_  
*Special Billing Information* IE: Outside Payment Agency, Parent Company Name, Etc.:

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### *Industry Credit (Trade) References*

Company: _____	Company: _____
Contact: _____	Contact: _____
Address: _____	Address: _____
City/State: _____	City/State: _____
Phone: _____ Fax: _____	Phone: _____ Fax: _____
Company: _____	Company: _____
Contact: _____	Contact: _____
Address: _____	Address: _____
City/State: _____	City/State: _____
Phone: _____ Fax: _____	Phone: _____ Fax: _____

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### *Bank Information*

Bank Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Applicant's signature attests to financial responsibility, ability, and willingness to pay our invoices in accordance with our terms of 1/2% 10 days, net 30 days. Any invoices not paid within terms are subject to additional service and/or collection charges such as costs and fees including but not limited to; interest, late fees, attorney fees, court fees, and collection fees. Interest may be computed on past due accounts at a monthly rate of 1.5%, or an annual rate of 18%. We have the right to reduce or withdraw credit privileges at any time. The above information is for the purpose of obtaining credit and is warranted to be true. I/we hereby authorize Hardwoods of Michigan, Inc. to investigate the references listed to determine my/our credit performance and responsibility.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_