

10330 ELM AVE FONTANA. CA 92337 | 909.357.7730

## CASH ON DELIVERY ACCOUNT APPLICATION

| FOR OFFICE USE ONLY |
|---------------------|
| Customer #:         |
|                     |

| APPROVED PAYMENT MADE |
|-----------------------|
| Cash Only             |
| Check                 |
| Reviewed by           |
| Date Approved         |
| Salesperson —————     |
| Resale Card on File   |

| CUSTOMER INFORMATION           |          |        |                   |  |                  |        |  |  |
|--------------------------------|----------|--------|-------------------|--|------------------|--------|--|--|
| Company                        |          | Phone  |                   | Fax  |                  |        |  |  |
| Billing Address                |          |        | City              |  | State            | Zip    |  |  |
| Delivery Address               |          |        | City              |  | State            | Zip    |  |  |
| Owners Name                    |          |        |                   |  | Driver's License |        |  |  |
| Email                          |          |        | Home Phone / Cell |  | Social Security  |        |  |  |
| Home Address                   |          |        | City              |  | State            | Zip    |  |  |
| COMMERCIAL BUSINESS REFERENCES |          |        |                   |  |                  |        |  |  |
| Company #1                     |          | Phone  |                   | Company #2   |                  | Phone  |  |  |
| Address #1                     |          |        |                   | Address #2   |                  |        |  |  |
| City #1                        | State #1 | Zip #1 |                   | City #2  | State #2         | Zip #2 |  |  |
| BANK REFERENCE                 |          |        |                   |  |                  |        |  |  |
| Name:                          |          |        |                   | Account #:   |                  |        |  |  |
| Address                        |          |        |                   | City   | State            | Zip    |  |  |
| IN THE EVENT IT BECOMES N      |          |        |                   | FILE SUIT TO ENSURE PAYME TION FEES: ACTUAL ATTORNEY |                  |        |  |  |

IN THE EVENT IT BECOMES NECESSARY FOR PETERMAN LUMBER INC. TO FILE SUIT TO ENSURE PAYMENT OF ANY DISHONORED CHECKS OR UNPAID PURCHASES, PETERMAN LUMBER INC. SHALL BE ENTITLED TO ANY COLLECTION FEES; ACTUAL ATTORNEY FEES; AND ALL COST INCURRED. I FURTHER AGREE THAT THE LAWS OF THE STATE SHALL APPLY AND THAT IN THE EVENT THERE IS LITIGATION COMMENCED TO ENFORCE THIS GUARANTEE, THE VENUE FOR SUCH ACTION SHALL BE IN SAN BERNARDINO COUNTY, CALIFORNIA, OR AT THE DISCRETION OF PETERMAN LUMBER INC.

ABOVE INFORMATION IS TRUE AND CORRECT. PETERMAN LUMBER INC. MAY VERIFY THE ABOVE INFORMATION; CHECK THE UNDERSIGNED'S CREDIT HISTORY; AND REPORT AUTHORIZED PERSONS AND CREDITED BUREAUS CONCERNING THE UNDERSIGNED'S CREDIT PERFORMANCE UNDER THIS AGREEMENT.

| SIGNATURE: | TITLE: | DATE: |
|------------|--------|-------|