Credit Line Application

Trade credit terms for qualified accounts.

PLEASE READ BEFORE COMPLETING

Thank you for doing business with Unique Wood Products. To ensure your application is processed as quickly as possible, please review all requirements below. Incomplete applications will delay approval.

APPLICATION REQUIREMENTS

1. A valid physical business address is required. P.O. Boxes are not accepted.
2. Minimum three (3) trade references with full contact information — name, phone, fax / email.
3. Minimum two (2) bank references with full account numbers.
4. Do not list your vendor's sales representative — contact must be from the credit department.
5. If unsure whether a reference provides credit information, confirm with them before submitting.
6. All applications are submitted to our business credit agency. Allow 5–10 business days.
7. Minimum 3 prepaid orders required before net terms are activated for new accounts.
8. Initial approval: Net 15 with a starting limit of $2,500. Reassessment to Net 30 thereafter.
9. Credit card payments are NOT accepted for orders placed under net terms — no exceptions.

HOW TO SUBMIT

Complete all sections — incomplete applications cannot be processed.

Attach tax certificate — if sales tax exempt, attach your Texas Resale Certificate.

Email completed form to — mgarcia@uniquewoodproducts.com

Mail or drop off — 9915 Tanner Road, Houston TX 77041

Questions? — call 713.462.5045 and ask for the Accounting Department.

IMPORTANT POLICIES

Credit terms are a privilege. Unique Wood Products reserves the right to modify, suspend, or revoke credit terms at any time based on payment history, account standing, or business conditions. Net terms accounts are strictly invoice-based — no credit card payments accepted. Accepted methods: ACH / wire transfer or company check only.

A $500 administrative fee may be applied to any account referred for collection. Interest accrues at 18% per annum. Attorney fees of 25% apply if referred to counsel.

By submitting this application, the applicant and personal guarantor(s) authorize Unique Wood Products to investigate all references and report account performance to credit agencies.

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BUSINESS INFORMATION

LEGAL BUSINESS NAME _____ DATE BUSINESS ESTABLISHED _____

DBA NAME (IF APPLICABLE) _____ FEDERAL TAX ID NO. (EIN) _____

OWNER(S) / PRINCIPAL(S) _____

Type of Ownership:

☐ Corporation ☐ LLC ☐ Sole Proprietorship ☐ Partnership ☐ Other

PHYSICAL BUSINESS ADDRESS — REQUIRED FOR APPROVAL

P.O. Boxes are not accepted.

STREET ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

YEARS AT PRESENT LOCATION _____ TELEPHONE _____ FAX _____

PRIMARY CONTACT NAME / TITLE _____ CELL PHONE (FREIGHT & DELIVERY) _____

MAILING ADDRESS (IF DIFFERENT FROM PHYSICAL)

MAILING STREET ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

COMMUNICATION & ORDER ROUTING

Specify the correct email for each function so quotes, orders, and invoices reach the right person.

EMAIL — QUOTES / ESTIMATES _____ EMAIL — SALES ORDERS _____ EMAIL — INVOICES / BILLING _____

ACCOUNTS PAYABLE CONTACT NAME _____ ACCOUNTS PAYABLE PHONE / EMAIL _____

AUTHORIZED BUYER #1 (NAME / TITLE) _____ AUTHORIZED BUYER #2 (NAME / TITLE) _____

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PURCHASE ORDER & PAYMENT

Do you require a PO Number on invoices? ☐ Yes ☐ No

IF YES — PO NUMBER FORMAT / INSTRUCTIONS

REQUESTED CREDIT LIMIT ($)

EST. MONTHLY PURCHASE VOLUME ($)

> IMPORTANT: Credit card payments are NOT accepted for orders placed under net terms. Accepted methods for net terms: company check or ACH / wire transfer only.

SALES TAX EXEMPTION

Are you sales tax exempt? ☐ Yes — Resale Certificate attached ☐ No

A valid Texas Sales and Use Tax Resale Certificate must be submitted with this application. Tax-exempt status is not applied until a certificate is on file. The customer is responsible for renewals.

EXEMPTION CERTIFICATE NUMBER

CERTIFICATE EXPIRATION DATE

TYPE OF EXEMPTION

BUSINESS TYPE & LOCATION

Business Type (check all that apply):

☐ Builder / Remodeler ☐ General Contractor ☐ Retail Store / Showroom ☐ Architect / Designer
☐ Cabinet Shop / Carpenter ☐ Commercial Contractor ☐ Flooring Contractor ☐ Painter / Finish Contractor

Do you have a showroom open to customers? ☐ Yes ☐ No

SHOWROOM ADDRESS (IF DIFFERENT FROM PHYSICAL ADDRESS)

DELIVERY & FULFILLMENT

How will you primarily receive orders?

☐ Will-Call ☐ Delivery to Our Location ☐ Both / Varies

If delivery — equipment for unloading?

☐ Forklift on site ☐ Loading dock ☐ No — Liftgate required

DELIVERY CONTACT NAME

DELIVERY CONTACT PHONE

PREFERRED DELIVERY DAYS / WINDOW

SPECIAL DELIVERY INSTRUCTIONS

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ACCOUNT PREFERENCES

PERSON(S) AUTHORIZED TO PLACE ORDERS | PREFERRED METHOD — INVOICES | PREFERRED METHOD — QUOTES

Separate invoices per job / PO? ☐ Yes ☐ No

Require monthly statements? ☐ Yes ☐ No

BANK REFERENCES (MINIMUM 2 REQUIRED)

Provide account numbers. Applications cannot be processed without complete bank reference information.

Bank Reference #1

BANK NAME | ACCOUNT NUMBER

CONTACT OFFICER (CREDIT DEPT.) | TELEPHONE | EMAIL / FAX

Bank Reference #2

BANK NAME | ACCOUNT NUMBER

CONTACT OFFICER (CREDIT DEPT.) | TELEPHONE | EMAIL / FAX

TRADE REFERENCES (MINIMUM 3 REQUIRED)

Contact must be from the credit department — not your sales rep. Confirm each reference provides credit information before listing.

Trade Reference #1

VENDOR / COMPANY NAME | ACCOUNT NUMBER | CREDIT MANAGER + PHONE / EMAIL

HIGH BAL. $ | CURR. BAL. $ | PAST DUE $ | DAYS PAST DUE (N/A · 1-30 · 31-60 · 61-90 · 90+)

Trade Reference #2

VENDOR / COMPANY NAME | ACCOUNT NUMBER | CREDIT MANAGER + PHONE / EMAIL

HIGH BAL. $ | CURR. BAL. $ | PAST DUE $ | DAYS PAST DUE (N/A · 1-30 · 31-60 · 61-90 · 90+)

Trade Reference #3

VENDOR / COMPANY NAME | ACCOUNT NUMBER | CREDIT MANAGER + PHONE / EMAIL

HIGH BAL. $ | CURR. BAL. $ | PAST DUE $ | DAYS PAST DUE (N/A · 1-30 · 31-60 · 61-90 · 90+)

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AUTHORIZATION TO APPLY FOR CREDIT

I/We understand that the information provided is for the purpose of opening a credit line with Unique Wood Products and warrant that the information provided is true and correct. I/We authorize investigation of all credit references provided. I/We understand and agree that all amounts due to Unique Wood Products shall be paid in accordance with approved payment terms.

AUTHORIZED SIGNATURE _____ TITLE (PRESIDENT / OWNER / CEO / CFO) _____ DATE _____

PRINTED NAME OF OFFICER _____ DIRECT PHONE / EMAIL _____

PERSONAL GUARANTEE AGREEMENT

Must be signed by an owner or authorized officer to be processed. This guarantee is a condition of credit approval.

In consideration of any sale made or credit extended to Purchaser by Unique Wood Products, the undersigned Guarantor(s) personally and unconditionally guarantee the full and prompt payment of all invoices, accounts, and indebtedness owed by Purchaser, whether presently existing or incurred hereafter. The liability of Purchaser and Guarantor(s) is joint and several. Any person signing below agrees that his/her signature serves in two capacities: as agent for Purchaser and personally as guarantor. Guarantor(s) authorize Unique Wood Products to investigate the creditworthiness, banking, trade, and credit references of Purchaser and Guarantor(s) and to report account performance to appropriate credit agencies. If Purchaser fails to pay when due, Unique Wood Products may assess a $500 administrative fee. Interest accrues at 18% per annum on unpaid balances. Attorney fees equal to 25% of the principal amount apply if referred to counsel, plus all collection and court costs. Purchaser and Guarantor(s) grant Unique Wood Products a security interest in all goods purchased. All disputes shall be submitted to a court of competent jurisdiction in Harris County, TX. Guarantor(s) irrevocably waive any right to trial by jury. This personal guarantee is continuing and may only be terminated by written notice delivered by certified mail to Unique Wood Products.

- ☐ I/We have read and understand the payment terms, including the no-credit-card policy for net-term accounts.
- ☐ I/We confirm this application includes a valid physical business address (P.O. Box not accepted).
- ☐ I/We acknowledge that a minimum of 3 prepaid orders are required before net terms are activated.

SIGNATURE OF GUARANTOR #1 _____ PRINTED NAME _____

TITLE _____ DATE _____ SOCIAL SECURITY NO. (LAST 4) _____

SIGNATURE OF GUARANTOR #2 (IF APPLICABLE) _____ PRINTED NAME _____

TITLE _____ DATE _____ SOCIAL SECURITY NO. (LAST 4) _____

INTERNAL USE ONLY

RECEIVED BY _____ DATE _____ ACCOUNT # ASSIGNED _____ CREDIT LIMIT APPROVED _____

TAX CERT. ON FILE? Y / N _____ TERMS APPROVED (NET 15 / NET 30) _____ APPROVED BY _____