

APPLICATION FOR CREDIT

P.O. Box 2658

Blairsville, Georgia, 30514 / Phone 706.745-6540/ Fax 706.781.6429



Business Information

Sole Proprietor

"S" Corp

LLC

Partnership

"C" Corp

Non-Profit

Year Business Established: _____

D&B No: _____

Federal Tax ID #: _____

If Sole Proprietor, please provide Social Security No: _____

Legal Business Name: _____

Subsidiary: _____

Type of Business: _____

Years in Business: _____

FORMS REQUIRED

Sales Tax Certificate, Resale of Exemption, or any other State form that would exempt specific project. (Please attach a copy).

Please attach a copy of your company's W-9 form.

PLEASE NOTE

Document copies must be received in order to process your order

Accounts Payable Information:

Contact Name: _____

Telephone# _____

Email _____

Extension _____

Alternate Contact:

Telephone# _____

Email _____

Extension _____

Invoicing Address

Invoices will be electronically sent to:

Email _____

Do you require a hard copy of the invoice mailed?

Yes ___ No ___

TRADE REFERENCES:

(If you have a Trade/Reference Sheet that includes all information you may attach instead.)

Company Name _____ Contact

Telephone: _____ Fax: _____ Email:

Company Name _____ Contact

Telephone: _____ Fax: _____ Email:

Company Name _____ Contact

Telephone: _____ Fax: _____ Email:

Are A-I-A forms required? Yes No

(Please forward additional billing documents if required)

Please include required formatting of Certificate of Liability Insurance Form.

Remit All Payments To:

**Panel Built, Inc.
P. O. Box 2658
Blairsville, Georgia 30514**

**Please remit all correspondence to:
dmawyer@panelbuilt.com**

Debbie Mawyer--