

Credit Application For
DREW FOAM COMPANIES, INC.
 1093 Highway 278 East * Monticello, Arkansas 71655
 Phone 1-800-643-1206 * Fax (870) 367-1564

NOTE: *Drew Foam's Credit Terms are net thirty (30) days.* (The credit manager must approve all other terms.)

Application for credit is hereby made and the following reference given. It is understood this information will be held in strictest confidence and used by the credit department of Drew Foam Companies, Inc.

Date: _____ Firm Name: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Telephone Number: _____ Fax Number: _____
 E-mail _____
 If subsidiary, name of parent company: _____
 If partnership, Name of partners & percent of ownership: _____

 If sole proprietorship, Name of principal: _____
 If Corporation, Date and State where incorporated: _____
 Type of business: _____ Year established: _____
 Principal Owner: _____ Chief Officer: _____
 Accounts Payable contact: _____ Telephone #: _____
Accounts Payable email address: _____

Banking References:

Primary Bank:	Secondary Bank:
Address:	Address:
City: State: Zip:	City: State: Zip:
Phone: () Fax: ()	Phone: () Fax: ()
Contact:	Contact:

Credit References

Name:	Name:
Address:	Address:
City: State: Zip:	City: State: Zip:
Phone: () Fax: ()	Phone: () Fax: ()
Contact: Email:	Contact: Email:

Name:	Name:
Address:	Address:
City: State: Zip:	City: State: Zip:
Phone: () Fax: ()	Phone: () Fax: ()
Contact: Email:	Contact: Email:

****FINANCIAL STATEMENT REQUIRED FOR CREDIT LINE**

Financial Credit Information GREATER THAN \$25,000**

Credit Line Requested:	Yearly Sales Estimate:
Sales Tax Exemption #:	Federal Tax ID #:

Undersigned understands the above information is submitted for the purpose of obtaining credit from Drew Foam Companies, Inc. and attests to the accuracy of the above information and realizes that both business and personal history may be investigated. In addition, if a collection agency is required, any and all fees will be assessed to the customers account.

Customer Signature and Title _____

Date _____