



TRIPLE "A" BUILDING CENTER

www.triplea.doitbest.com

MASSENA
 3 Malby Avenue
 Massena, NY 13662
 Phone (315) 764-0596
 Fax (315) 769-6022

CANTON
 25 Commerce Lane
 Canton, NY 13617
 Phone (315) 386-4531
 Fax (315) 386-4656

POTSDAM
 6588 State Highway 56
 Potsdam, NY 13676
 Phone (315) 265-2350
 Fax (315) 265-0932

APPLICATION FOR CHARGE ACCOUNT

Date: _____
 Applicant Name: _____ Spouse's Name: _____
 Street Address: _____ Phone Number: _____
 Email Address: _____
 City, State, Zip: _____
 Applicant Soc. Sec. #: _____ Spouse Soc. Sec. #: _____
 Applicant Date of Birth: _____ Spouse Date of Birth _____
 Applicant Current Employer: _____ Employer Phone _____
 Spouse Current Employer: _____ Spouse Employer Phone _____

BANK REFERENCES:

Savings Account: Bank _____ Branch _____
 Account Number _____ Phone Number _____
 Contact _____
 Checking Account: Bank _____ Branch _____
 Account Number _____ Phone Number _____
 Contact _____

CREDIT REFERENCES:

- LIST AT LEAST THREE (3) CREDIT REFERENCES
- PLEASE LIST LOCAL BUSINESS REFERENCES, IF POSSIBLE
- PLEASE LIST ANY DEBTS YOU HAVE WITH ANY PERSON OR BUSINESS
- DO NOT LIST ANY CREDIT CARDS

What type of project are you working on? _____

We are able to send your invoices and monthly statements via email or regular mail. Please check the appropriate boxes as to how you would like to receive your invoices and statements:

Invoices: <i>Please check your choice. Note – You will always receive a copy of the invoice while you are at the store.</i>	
<input type="checkbox"/>	Please provide me a copy of my invoices each time a purchase is made.
<input type="checkbox"/>	Please fax me a copy of my invoices each time a purchase is made.
Monthly Statements: <i>Please check your choice.</i>	
<input type="checkbox"/>	Please mail my statement each month
<input type="checkbox"/>	Please fax my statement each month.
<input type="checkbox"/>	Please email my statement each month.
<input type="checkbox"/>	Include copies of my invoices in the fax.
<input type="checkbox"/>	Include copies of my invoices in the email.



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I/We, the undersigned, authorize investigation of all information contained in this application. I/We, the undersigned do agree that the information provided in this application for credit is warranted to be accurate and true. I/We hereby request credit terms of sale from TRIPLE "A" LUMBER, INC. By signing this document, I/We understand and accept the terms of sale to myself or my agents as follows:

- 1) I/We agree to the terms of invoices as currently issued or as amended in the future.
- 2) I/We, the undersigned, promise to pay all balances as shown on TRIPLE "A" LUMBER, INC. monthly statements in full by the tenth (10th) of the following month. ALL INVOICES are due and payable on the 10th of the month following the date of purchase: i.e. anything charged in August would be due and payable in full by September 10th.
- 3) All delinquent invoices are subject to a 2% service charge for each month or portion thereof, with a minimum charge of \$1.00. This is an annual percentage rate of 24%.
- 4) I/We, the undersigned, agree that Triple "A" Lumber, Inc. will charge a 2% fee on any account paid with a credit card.
- 5) I/We, the undersigned, further guarantee to TRIPLE "A" LUMBER, INC. the payment of any and all expenses paid or incurred by us (including reasonable attorney fees up to 40% of outstanding obligations and any collection agency expenses) in connection with the collection of all sums and obligations guaranteed hereunder.
- 6) I/We, the undersigned, do agree by signing this document that all prior purchases from TRIPLE "A" LUMBER, INC. by me/us or my/our corporation or company shall be governed by this agreement. In particular, I/We hereby assume personal and individual responsibility for all charges heretofore made with TRIPLE "A" LUMBER, INC. by my/our corporation or company.
- 7) I/We, the undersigned, understand that TRIPLE "A" LUMBER, INC. can, at any time and without notice, close this account or put it on Cash on Delivery (COD) status and request updated financial information.
- 8) I/We, the undersigned, do agree that I/We did not modify this agreement in any form.
- 9) I/We, the undersigned do agree to waive the right to discontinue this agreement at any time. This agreement can only be terminated by TRIPLE "A" LUMBER, INC.
- 10) I/We, the undersigned, does agree that all defects, damages and shortages MUST be reported within 48 hours (two business days) or no allowances will be considered.
- 11) I/We, the undersigned, do agree in the sole discretion of TRIPLE "A" LUMBER, INC., that returns may be considered, if authorized, subject to a restocking charge of 30%.
- 12) I/We, the undersigned, shall pay for all products delivered, within terms and without setoff, looking solely to the manufacturers for warranty claims and adjustments; TRIPLE "A" LUMBER, INC. may assist or facilitate such claims, if it elects, but invoices for such product(s) will be paid in accordance herewith by me/us or my/our corporation or company nevertheless. (no vendor warranties, express or implied)
- 13) The seller disclaims all express and implied warranties except those made by the manufacturer.



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I hereby agree to supply TRIPLE "A" LUMBER, INC. with a list, in writing, and signed by me, of persons authorized to make charges at TRIPLE "A" LUMBER, INC. on my behalf or on behalf of my corporation or company, and I/We further agree to be personally and individually liable and responsible for charges made by such authorized persons. My signature below indicates my authorization for TRIPLE "A" LUMBER, INC. to obtain a national credit report at anytime.

Upon a non-corporate applicant becoming a customer, and incorporating, notice must be given in writing to TRIPLE "A" LUMBER, INC. and received and acknowledged by TRIPLE "A" LUMBER, INC. and shall both be responsible for purchases after incorporation is filed.

DATE _____
 DATE _____
 DATE _____
 DATE _____

SIGNATURE _____
 SIGNATURE _____
 SIGNATURE _____
 SIGNATURE _____