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# GOODIN

### www.goodinco.com

MINNEAPOLIS | ST. PAUL | DULUTH | DETROIT LAKES | ST. CLOUD BRAINERD | ROCHESTER | FARGO | SIOUX FALLS | OMAHA EAU CLAIRE | WAUSAU | MADISON | MILWAUKEE | GREEN BAY

# Credit Dept. (612) 302-5397

### **Business Data**

Business Name	Date of Application			
Billing Address				
City	State	9-Digit Zip Code		
Shipping Address				
City	State	9-Digit Zip Code		
Business phone ( ) Fax (	)			
e-mail Address				
Goodin Company offers email of invoices and/or Statements instead of mailing paper copies. Please email Invoices Statements INeither e-Mail Address for your Invoices and/or Statements:				
Are you a Corporation Partnership Sole Proprietorship LLC				
Federal Tax I.D. or So	or Social Security Number			
If a Corporation, date of incorporation	State of incorporation			
Owners or Principal Stockholders				
List officers or Owners President	Vice President			
Secretary	Treasurer			
Type of Business	Date Started			
Previous business ventures or employment				

I have been advised that Goodin Company's terms of sale, unless otherwise quoted in writing, are 2% 10th prox net 30 days.

By making this application, I understand I am expected to abide by these terms of payment; and that, should my account become past due for any reason whatsoever, I automatically forfeit the cash discount; and agree to pay interest on any past due balance at the rate

of 1-1/2% per month plus all costs of collection, including reasonable attorney's fees. The undersigned authorizes Goodin Company, without notice, to obtain a consumer credit report to determine overall credit and financial status.

If this application is made on behalf of a corporation, limited liability company, or a partnership, the undersign hereby agrees to personally guarantee payment of any amount due and owing by said corporation.

I understand that a digital copy of this document will be made and filed digitally. I agree that the digital copy will be the official record of this document.

Signed

Date

# **Supplier Reference**

Name	Phone
City/State	Fax and/or e-mail
Name	Phone
City/State	Fax and/or e-mail
Name	Phone
City/State	Fax and/or e-mail

# **Balance Sheet**

Assets	
Cash	\$ -
Accounts Receivable (Completed Jobs)	 -
Contracts on Jobs in Progress	
Inventory	
Trucks, Tools & EquipmentBusiness	
Personal	 -
Other Assets	
Total Assets	\$
Liabilities	
Trade Accounts Payable	\$
Accrued Taxes	
Owing Banks or Other Creditors on Demand Notes	
Other Current Liabilities (Equipment Loans, Etc.)	
Balance of Obligation on Contracts Listed as Assets Above	
Long Term Liabilities (Mortgages Payable, Etc.) Business	
Personal	 -
Total Liabilities	\$
Net Worth	 
Net Worth	\$

# Please email, fax or mail application