Des Plaines Material & Supply

Material Waiver request requirements:

1. When requesting material waiver copies of sales receipts are needed, receipts must match the dollar amount you are requesting on the waiver.
2. Must specify if a final or partial waiver is needed.
3. Company name.
4. Type of materials purchased.
5. Property address where material was installed.
6. Owner of Property.
7. Telephone number for contact person requesting waiver.
8. Dollar amount needed.
9. Mailing address where original waiver should be mailed to or if you will be picking it up at our location at 1269 E. Golf Rd, Des Plaines, IL. 60016.

Attached Request for Waiver form must be completed

If you have any questions, please feel free to contact our office at (847)824-4149.

Material Waiver Request

Final Waiver_____ Today's Date_____

Partial Waiver_____

Name of Company_____

Type of Materials_____

Property Address_____

_____

Owner of Property_____

Amount of Waiver_____

Sales Receipt Numbers_____

Telephone#_____

Email Address_____

Mailing Address for original waiver to be sent_____

_____

Pick up original waiver at Des Plaines Material_____

1269 E. GOLF ROAD, DES PLAINES, IL 60016
CREDIT APPLICATION

1. Company Information

Full Legal Name/Business Entity		Phone #	
Doing Business As (DBA)		AP Contact name	
Billing Address		City State	Zip
Company Type: Proprietorship Partnership Franchise Corporation Other:			
Year Business Established	Type of Business	Resale #	
Federal Tax ID	State of Incorporation	Fax #	
E-Mail Address(es):		Requested credit amount	

2. Owner Information

Full Name (including middle initial)	Title	Social Security #		
Home Address	City	State	Zip	Phone #

3. Bank References

Bank Name	Contact			Number of years doing business with this company	
Address	City	State	Zip	Phone #	Fax # or Email

GENERAL TERMS AND CONDITIONS AND PERSONAL GUARANTEE

1. Net 10th Prox. All accounts past due 30 days will be placed on hold until balance is paid in full.
2. No additional credit will be extended to past due accounts unless satisfactory arrangements are made with our credit Department.
3. Agreement to pay a service charge of 1.5% per month (18% annual rate) added to accounts unpaid after due date.

PERSONAL GUARANTY

I, _____(Guarantor), having a financial interest further guarantees the collection of the obligation herein before mentioned, including any interest that may accrue thereon, upon condition, however, that in the event of the default of payment of said obligation.

We hereby apply for credit and affirm financial responsibility, ability and willingness to pay invoices in accordance with published terms. The above information is warranted to be true and complete. We hereby authorize you to verify and collect information on us, including but not limited to bank references, trade credit references, consumer and/or commercial credit reports. We agree to pay all costs of collection and litigation on this account in accordance with the laws of the Creditor's State of Incorporation. We agree that all decisions with respect to the extension or continuation of credit shall be in the sole discretion of the Creditor.

I have read the terms and conditions stated and agree to all of these terms and conditions.

Authorized Signature: _____ Date:_____
Printed Name: _____ Title:_____

DES PLAINES MATERIAL & SUPPLY
1269 E. GOLF ROAD
DES PLAINES, IL 60016
Ph: 847-824-4149 Fax: 847-298-3704
Email: sales@desplainesmaterial.com

*PLEASE FILL OUT THIS FORM IN ITS ENTIRETY

Credit Reference Request Application

Applicant Information:

Company Name: _____

Contact Name: _____

Phone Number: _____

Email Address: _____

Fax Number: _____

Please provide three business credit references below. Include companies you have done business with recently.

Credit Reference 1:

Company Name: _____

Contact Name: _____

Phone Number: _____

Email Address: _____

Fax Number: _____

Credit Reference 2:

Company Name: _____

Contact Name: _____

Phone Number: _____

Email Address: _____

Fax Number: _____

Credit Reference 3:

Company Name: _____

Contact Name: _____

Phone Number: _____

Email Address: _____

Fax Number: _____

Please email the completed form to:
sales@desplainesmaterial.com