

AHI SUPPLY, LP

MANUFACTURERS AND DISTRIBUTORS OF QUALITY CONSTRUCTION PRODUCTS

P.O. Box 2789 ALVIN, TX 77512

(281) 331-0088 (800)873-5794 (281)331-9813 FAX

ATTN:

CREDIT APPLICATION

DATE _____

NAME OF FIRM _____

BILLING ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHYSICAL ADD _____ CITY _____ STATE _____ ZIP _____

BUS.PH _____ YRS. IN BUS. _____ TYPE OF BUS. _____ FAX _____ WEBSITE _____

() Contractor – Must supply job address and or must fill out a Job Information Sheet for all orders.

() Distributor – When purchasing rebar, you must supply job address or fill out a Job Information Sheet.

NAME OF PRESIDENT/OWNER _____

CORPORATION ()

PARTNERSHIP ()

PROPRIETORSHIP ()

SECRETARY/PARTNER _____

TREASURER/PARTNER _____

STATE OF INCORPORATION _____ DBA IF ANY _____

IF BRANCH, GIVE NAME, ADDRESS & PH. OF HOME OFFICE _____

ARE PURCHASE ORDERS REQUIRED? _____ TAX EXEMPT No. _____

A/P REP _____ PH# _____ EMAIL _____

PURCHASING REP _____ PH# _____ EMAIL _____

ALL INVOICES/STATEMENTS ARE AUTO-GENERATED, PLEASE PROVIDE CONTACT INFO BELOW TO RECEIVE.

CONTACT: _____ EMAIL: _____

BANK REFERENCE

BANK _____ PH# _____ OFFICER _____

ADDRESS _____ ACCT# _____

TRADE REFERENCES

(MUST HAVE AT LEAST 3 REFERENCES EQUIVALENT TO THE AMOUNT OF CREDIT REQUESTING)

COMPANY NAME

ADDRESS

OFFICE PHONE NUMBER

1. _____

2. _____

3. _____

4. _____

AMOUNT OF CREDIT DESIRED _____ PER MONTH

OUR TERMS ARE: NET 30 DAYS FROM THE DATE OF INVOICE.

IF PAYMENT IS NOT RECEIVED WHEN DUE, THE APPLICANT ALSO AGREES TO PAY A MONTHLY SERVICE CHARGE EQUAL TO ONE AND ONE-HALF PERCENT (1 1/2%) OR THE MAXIMUM AMOUNT ALLOWABLE UNDER APPLICABLE STATE LAW, OF THE UNPAID DELINQUENT BALANCE UNTIL THE ACCOUNT IS PAID IN FULL. IF THE ACCOUNT IS PLACED FOR COLLECTION, THE APPLICANT AGREES TO PAY ALL COSTS AND EXPENSES OF COLLECTION, INCLUDING REASONABLE ATTORNEY’S FEES AND EXPENSES.

INTENTS AND LIENS WILL BE FILED NOT LATER THAN THE 15TH DAY OF THE SECOND MONTH FOLLOWING EACH MONTH IN WHICH MATERIAL WAS DELIVERED OR LABOR PERFORMED, IN WHOLE OR IN PART. TEXAS PROPERTY CODE 53.252(B)

PLEASE SIGN BENEATH EACH PARAGRAPH!

IN UNDERSTAND THAT THE INFORMATION FURNISHED YOU IN THIS APPLICATION IS FOR THE PURPOSE OF OBTAINING CREDIT FROM YOUR FIRM. I ATTEST THAT I AM AUTHORIZED, IN MY CAPACITY WITH MY FIRM, TO BIND MY FIRM ACCORDINGLY. ALL MONIES DUE TO YOU SHALL BE DUE AND PAYABLE AT BRAZORIA COUNTY, TEXAS. ALL PAST DUE AMOUNTS SHALL AUTOMATICALLY DRAW INTEREST AT THE RATE OF EIGHTEEN (18) PERCENT PER ANNUM.

SIGNED: _____
PRINT NAME SIGNATURE

TITLE

IN CONSIDERATION OF CREDIT BEING EXTENDED TO THE AFOREMENTIONED FIRM, I PERSONALLY GUARANTEE ALL INDEBTEDNESS HEREUNDER. I FURTHER AGREE THAT: THIS GUARANTEE IS AN ABSOLUTE, COMPLETED AND CONTINUING ONE; THAT NO NOTICE OF THE INDEBTEDNESS OR ANY EXTENSION OF CREDIT ALREADY OR HEREAFTER CONTRACTED BY OR EXTENDED NEED BE GIVEN; THAT THE TERMS MAY BE REARRANGED, EXTENDED AND/OR RENEWED WITHOUT NOTICE TO ME; AND THAT I WILL WITHIN FIVE DAYS FROM DATE OF NOTICE THAT THE ACCOUNT IS PAST DUE, PAY THE AMOUNT. I UNDERSTAND THAT I WILL NEED TO SUPPLY A COPY OF MY DRIVER’S LICENSE TO AHI SUPPLY, LP.

SIGNED: _____
GUARANTOR DRIVER’S LICENSE # DATE OF BIRTH

SUBSCRIBED AND SWORN TO BEFORE ME BY THE SAID _____

THIS ____ DAY OF _____, 2023, TO CERTIFY WHICH WITNESS MY HAND AND SEAL OF OFFICE.

NOTARY PUBLIC,
COUNTY, TEXAS

OFFICE USE ONLY

APPROVED: _____ DENIED: _____

CREDIT LIMIT: _____ DATE OPENED: _____ CASH ONLY: _____

