

American Lumber, Inc.
PO Box 2150
Bryan, TX 77806
979-778-4084 Phone
830-278-8674 Fax
www.americanlumber.net



CREDIT APPLICATION

Thank you for your interest in opening an account with American Lumber, Inc. Please rest assured of our confidential treatment of all information supplied. This credit application must be signed by an authorized representative of your company.

Company's Legal Name:			
Billing Address:			
City:	State:	Zip Code:	County:
Phone #:		Fax #:	
Company's Website Address:			

Delivery Address: (check if same as billing <input type="checkbox"/>)			
City:	State:	Zip Code:	County:
Phone #:		Fax #:	

Purchasing Contact:	Title:	A/P Contact:
Purchasing Email Address:	Phone #: Cell #:	A/P Phone #: A/P Email:

Business Description:		Years in Business:	
<input type="checkbox"/> Corporation	<input type="checkbox"/> LLC	<input type="checkbox"/> Partnership	<input type="checkbox"/> Proprietorship
If Corporation, Date of Inc:		State of Inc:	
Have you ever filed bankruptcy?		If yes, on what date?	

Principals:	Title:	Home Address:	Home Phone #:

BANK REFERENCES:

Name of Bank:		
Address:		
City, State, & Zip:	Phone #:	Email address:
Officer:		Account #:

Name of Bank:		
Address:		
City, State, & Zip:	Phone #:	Email address:
Officer:		Account #:

TRADE REFERENCES:

Please include an email address or fax # for each reference, including bank references.

At least 2 references must be lumber references.

PLEASE PROVIDE D&B/DUNS #: _____

Name of Business:		
Address:		
City, State, & Zip:		
Phone #:	Email or Fax#:	Contact:

Name of Business:		
Address:		
City, State, & Zip:		
Phone #:	Email or Fax#:	Contact:

Name of Business:		
Address:		
City, State, & Zip:		
Phone #:	Email or Fax#:	Contact:

Name of Business:		
Address:		
City, State, & Zip:		
Phone #:	Email or Fax#:	Contact:

Name of Business:		
Address:		
City, State, & Zip:		
Phone #:	Email or Fax #:	Contact:

Approximate Credit Line Required:	
Invoices are to be (SELECT ONE): () emailed () faxed () mailed	
If emailed, please supply email address :	If faxed, please supply Fax # :
Purchase Orders Required: () yes () no	Authorized Buyers:

Sales Tax: () All Purchases Exempt () Some Purchases Taxable () All Purchases Taxable
Note: PLEASE ATTACH AN EXEMPTION OR RESALE CERTIFICATE FOR EXEMPT PURCHASES. YOU MAY USE YOUR OWN STATE'S TAX ID# ON A TEXAS RESALE TAX CERTIFICATE. TAX PERMITS ARE NOT ACCEPTED.

****Please attach copies of your most current year end and most recent month end financial statements****

Applicant warrants financial responsibility, ability, and willingness to pay invoices as rendered in accordance with their terms. All invoices and billings are payable to the office of American Lumber, Inc, in Bryan, Brazos County, Texas. Applicant certifies all information on this application and accompanying documents is for the purpose of obtaining credit and warrants such to be true. Applicant authorizes American Lumber, Inc. to investigate the credit and financial responsibility of the undersigned, including contact with the references listed.

 Authorized Signature (must be authorized to access bank info)

 Date

 Printed Name & Title

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give form to the
requester. Do not
send to the IRS.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)		
	2	Business name/disregarded entity name, if different from above.		
	3a	Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____ Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ <i>(Applies to accounts maintained outside the United States.)</i>	
	3b	If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions _____ <input type="checkbox"/>		
	5	Address (number, street, and apt. or suite no.). See instructions.	Requester's name and address (optional)	
	6	City, state, and ZIP code		
	7	List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number																									
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Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person	Date
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they