



*Freeman Rock, Inc.*  
 Ready Mix Concrete ~ Rock ~ All Types  
 Dump Truck Hauling ~ Landscaping Materials  
 Site Construction Preparation  
 Oregon Contractor's Board License #155569

99031 South Bank Chetco River Rd – P.O. Box 1218, Brookings OR 97415  
 Phone: 541-469-2444 Fax: 541-469-0247  
 Web page [www.freemanrock.com](http://www.freemanrock.com)  
 mail@freemanrock.com

**APPLICATION FOR CREDIT**

LEGAL BUSINESS NAME: \_\_\_\_\_ DATE FIRST ESTABLISHED: \_\_\_\_\_

Federal ID: \_\_\_\_\_ DUNS Number: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Physical Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Office Phone #: \_\_\_\_\_ FAX Number: \_\_\_\_\_

Project Manager: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Do You Require P.O.'s? Yes No Remarks: (Who do we call? Who can authorize? Etc. ) \_\_\_\_\_

Accounts Payable Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ Do you require the duplicate delivery slips to be scanned and attached to emailed invoices?  Yes  No

Contractors Registration # \_\_\_\_\_ State of Registration: \_\_\_\_\_

Lender's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

**Principal Owners / Officers**

NAME SOCIAL SECURITY NUMBER TITLE

NAME SOCIAL SECURITY NUMBER TITLE

*Terms and Conditions*

1. Account Statements are mailed near the end of each month. The balance is due in full by the 10<sup>th</sup> of the next month. Balances not paid in full by the following statement will incur a 1.5 % account maintenance fee (18% annual percentage rate), with a \$5.00 minimum charge
2. Returned checks will be charged a \$30.00 fee. Returned checks not collected will be turned over to law enforcement for collection. The endorser will be liable for 3 times the face value and court costs.
3. Notice of Right to Lien will be sent to 3<sup>rd</sup> party property owners and lenders in accordance with Oregon and California state law.
4. Cost of Collection or Litigation: If Freeman Rock, Inc. is required to initiate collection proceedings to collect this account, the account holder or guarantor agrees to pay all collection costs incurred by Freeman Rock, Inc., including attorney fees and all other reasonable collection costs, whether or not any suit or action is filed. If suit or action is instituted to enforce or interpret any of the terms of this agreement, including any proceeding under the United States Bankruptcy Code or any successor statute, the prevailing party shall be entitled to recover all expenses reasonably incurred at, before and after trial and on appeal, whether or not taxable as costs; including, without limitation, attorney fees, witness fees (expert and otherwise), witness travel expenses, deposition costs, copying charges and other expenses reasonably incurred. Account guarantor specifically agrees that it shall pay any charge imposed by an independent collection agency if this account is referred to an independent collection agency by Freeman Rock, Inc., including a percentage charge based on the balance owing (usually fifty percent) and account maintenance fees.
5. Freeman Rock, Inc. shall not be responsible for damage inside the curb or property line due to placement of concrete or rock.
6. You shall notify all applicable utility suppliers, obtain and pay for all permits, fees and licenses necessary for the performance of the work and shall pay all federal, state, and local taxes, applicable to the work.
7. Freeman Rock, Inc. shall be entitled to terminate all activities on this account should it become delinquent. Freeman Rock, Inc. shall reserve the right to take any steps necessary to collect.
8. Any changes to these terms will be in writing.
9. Freeman Rock shall reserve the right to charge at regular rates or overtime rates as appropriate for any time lost due to being called out to a job-site which is not ready for Freeman Rock to accomplish the ordered tasks.
10. I understand that by affixing my signature hereto, I agree to personally guarantee any and all indebtedness of the applicant herein to Freeman Rock, Inc, its successor and assigns.

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Signature Principal Owner / Officer

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Legal Business Name of Account



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**REQUEST INQUIRY OF CREDIT RATING**  
*THIS FAX IS ONE PAGE*

VENDOR: \_\_\_\_\_ DATE: \_\_\_\_\_

ATTN: \_\_\_\_\_ FAX: \_\_\_\_\_

CITY: \_\_\_\_\_ PHONE: \_\_\_\_\_

I have applied for a line of credit with Freeman Rock, Inc. I am using you for a credit reference. I authorize and hold you harmless to release information on the following questionnaire to Freeman Rock, Inc. for the referenced account. Please return the information by FAX : 541-469-0247 Attn: A/R.  
 I am thanking you in advance, your prompt reply is appreciated.

\_\_\_\_\_  
*Signature of Account Holder*

Name on Act: \_\_\_\_\_ Act #: \_\_\_\_\_

Date Opened: \_\_\_\_\_ Today's Balance: \_\_\_\_\_ Date of Last Activity: \_\_\_\_\_

Avg Days to Pay: \_\_\_\_\_ Credit Limit: \_\_\_\_\_ Terms: \_\_\_\_\_

**ACCOUNT RATING**

EXCELLENT: PAYS EARLY       GOOD: PAYS ON TIME       FAIR: SOME LATE FEES       POOR: ALWAYS LATE       STALE: HARDLY USES ACT

COMMENTS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

VERIFIED BY: \_\_\_\_\_ TITLE: \_\_\_\_\_



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