



CREDIT APPLICATION FOR DUNLAP SUPPLY

13 S SMITH ST

BATESVILLE, IN 47006

PHONE: 812-934-2710 / FAX: 812-934-2718

DUNLAPS.STORE@GMAIL.COM

A. COMPLETE IF A BUSINESS ENTITY:

BUSINESS NAME: _____

PERSON RESPONSIBLE FOR BILL/ACCOUNTS PAYABLE: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

B. COMPLETE IF A PERSONAL ACCOUNT:

NAME: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

PLACE OF EMPLOYMENT: _____ HIRE DATE: _____

C. FINANCIAL INFORMATION

PLACE OF BANKING: _____ BANK PHONE NUMBER: _____

CONTACT PERSON @ BANK: _____

MONTHLY CREDIT LIMIT REQUESTED FROM DUNLAP SUPPLY: _____

HAVE YOU OR A BUSINESS OWNED/OPERATED BY YOU EVER FILED FOR OR DECLARED CHAPTER 11/BANKRUPTCY?

- YES
- NO

I HEREBY AUTHORIZE THE RELEASE OF INFORMATION BY THE BANK AND REFERENCES LISTED ABOVE TO DUNLAP SUPPLY. THE INFORMATION RELEASED WILL BE HELD IN THE STRICTEST CONFIDENCE BY DUNLAP SUPPLY. BY SIGNING, I AGREE THAT ALL THE ABOVE INFORMATION IS TRUE, HONEST, AND ACCURATE. BY SIGNING, I AGREE TO THE TERMS OF PAGE 2.

SIGNED: _____ DATE: _____

PRINTED NAME: _____

SHOULD YOU BE APPROVED FOR A CREDIT ACCOUNT WITH DUNLAP SUPPLY, HERE IS MORE INFORMATION REGARDING OUR ACCOUNT HOLDER BENEFITS AND PROCEDURES:

- Make checks payable to Dunlap Supply mailed to 13 S Smith St / Batesville, IN 47006
- WE **DO NOT** ACCEPT AMERICAN EXPRESS. If you pay with American Express while online, it will process and you will receive another convenience fee invoice for 10% of the total invoice(s) amount you charge with AE.
- Return Policy: A credit memo will be issued and applied to the account
- A 2% monthly late charge (with a \$1.00 minimum) will be applied to invoices past due. If you are working with a bank (specifically with a construction loan) and are awaiting loan checks (for meeting certain thresholds within the project) and need to extend your due date, please call the store and ask for Accounting to discuss how we can help.
- Customers who meet a monthly threshold can receive special discounting on certain products. You will lose this discount if one or more of the following occur:
 - 1.) You fail to meet the minimum monthly spending amount for 2+ months
 - 2.) You fail to pay the monthly statement balance **in full** for 2+ months
 - 3.) You fail to pay the monthly statement balance by the 10th of the month/due date (if dating was issued to the invoice)
- *In short: Spend the required monthly amount, and then pay the account balance in full by the due date. If you have concerns about your discount, please contact us.*
- Items must be picked up/delivery scheduled within 30 days of the invoice.
- We **DO NOT** have an install or contractor crew. (We do have a measuring crew that can confirm window sizes or door handing.) We **DO NOT** sell services besides what is done in our mill (glass repair, door repair, etc. all done **IN HOUSE** on **OUR** site.) You will be billed for material at time of delivery. Installation (if we assisted in helping find a contractor) **WILL NOT** be billed by Dunlap Supply. **YOU WILL GET SEPERATE BILLS. YOU WILL PAY SEPERATELY.** Invoices for goods are due within 30 days of delivering the project - whether installed or not, whether Dunlap Supply assisted in finding a contractor or not.
- If you provide your own measurements and handing and later find out they are incorrect, you cannot return the items.
- Special Order Products returned after 30 days are subject to a restock charge **IF** found to be returnable. Restock charges vary per supplier/item/amount. Some items cannot be returned if not in full box quantities, meaning we cannot credit piece quantities.
- No monthly credit limit/account will exceed \$50,000.00 USD
- Bad check fee = \$50.00
- We will not run a card (credit or debit) for less than \$5.00.

REFERENCES:

1.) NAME: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

2.) NAME: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

3.) NAME: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

*Return this form via email (dunlaps.store@gmail.com) or drop off at the store (13 S Smith St.)
You will hear back from us within 5 business days of returning this form.*

DO NOT COMPLETE BELOW PORTION - OFFICE USE ONLY.

**** FOR OFFICE USE ONLY ****

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DATE: _____ INITIALS OF DUNLAP SUPPLY REVIEWER: _____

THIS CLIENT WAS:

APPROVED FOR A MONTHLY CREDIT LIMIT OF \$ _____ USD

NOT APPROVED FOR AN ACCOUNT

- REASONING: _____

PERSON/COMPANY NOTIFIED OF STATUS ON _____ VIA _____