



# St. Croix Valley Hardwoods, Inc.

P.O. Box 120

Luck, Wisconsin 54853

Phone: 715-472-8994 Fax: 715-472-2108

## Credit Application

Business Name \_\_\_\_\_ Phone \_\_\_\_\_

Business Address \_\_\_\_\_

Federal ID Number \_\_\_\_\_ or SS # Salesperson # \_\_\_\_\_

### Principles Or Officers:

1) \_\_\_\_\_ 3) \_\_\_\_\_

2) \_\_\_\_\_ 4) \_\_\_\_\_

### Bank References:

Name: \_\_\_\_\_ Account Number \_\_\_\_\_

Address: \_\_\_\_\_ Phone \_\_\_\_\_

Name: \_\_\_\_\_ Account Number \_\_\_\_\_

Address: \_\_\_\_\_ Phone \_\_\_\_\_

### Trade References:

Name: \_\_\_\_\_ Account Number \_\_\_\_\_

Address: \_\_\_\_\_ Phone \_\_\_\_\_

Fax\* \_\_\_\_\_

Name: \_\_\_\_\_ Account Number \_\_\_\_\_

Address: \_\_\_\_\_ Phone \_\_\_\_\_

Fax\* \_\_\_\_\_

Name: \_\_\_\_\_ Account Number \_\_\_\_\_

Address: \_\_\_\_\_ Phone \_\_\_\_\_

Fax\* \_\_\_\_\_

**Amount Requested \$** \_\_\_\_\_

I understand that the above information is provided for the purpose of obtaining merchandise on credit from St. Croix Valley Hardwoods, Inc. (SCVH). The information to my knowledge is correct. I give SCVH permission to contact bank references, trade references, and other credit sources. If SCVH approves the credit application, I agree to the payment terms of 1% 10 Days ADI Net 30 Days ADI. If the account enters in default, I also agree to pay SCVH any attorney fees, court costs, collection fee's and all finance charges incurred at the rate of 1-1/2% per month (18% annually).

**Signature\***  
(owner or officer)

**Printed Name\***

**Title\***

**Date\***

\* required