

1601 S. C St.  
 Port Angeles, WA 98363  
 (360) 457-8581  
 (360) 457-8896 FAX  
 angelesmillwork.com



3111 E Highway 101  
 Port Angeles, WA 98362  
 (360) 452-8933  
 (360) 452-8943 FAX  
 hartnagels.com

Fax or deliver to either of our stores.

**ACCOUNT APPLICATION**

Date: \_\_\_\_\_

**"A" Section (\*) required for Cash Only Account "A,B&C" Sections required for Charge Accounts**

**A TYPE OF ACCOUNT:**  **Charge Account** \* Credit Level Requested \$\_\_\_\_\_ (\$1000 if left blank)  
 **Cash Only Account**  **Prepaid (Declining Balance) Account**

\* Company or Individual Name(s): \_\_\_\_\_

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

\* Physical Address (if different from above): \_\_\_\_\_

\* PHONE: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_ FAX: \_\_\_\_\_

\*Primary Email: \_\_\_\_\_ Secondary Email (optional): \_\_\_\_\_

\* Application is for a:  Corporation  Partnership  Proprietorship  Individual

Type of Business: \_\_\_\_\_ Years in Business: \_\_\_\_\_

(If applicable) UBI #: \_\_\_\_\_ WA State Contractor Lic. # \_\_\_\_\_

**We are required to charge WA State Sales Tax unless you PROVIDE A COPY of your Reseller Permit.** \_\_\_\_\_ Initial here

**B INDIVIDUAL(S) OR PRINCIPALS OF COMPANY:**

NAME	ADDRESS	TITLE/OCCUPATION	SOCIAL SECURITY NO. (REQUIRED)
_____	_____	_____	_____
_____	_____	_____	_____

CREDIT REFERENCES	ADDRESS	PHONE	CONTACT
_____	_____	_____	_____

BANK REFERENCE	ADDRESS	PHONE	CONTACT	CONSTR. LOAN? YES NO
_____	_____	_____	_____	_____

**PRINT NAMES OF THOSE AUTHORIZED TO SIGN ON THIS ACCOUNT** Changes will require your signature on an Account Change Form.

PLEASE PRINT \_\_\_\_\_

**C NOTICE: The following agreement is provided for your information. Please read the agreement before signing!**

**CREDIT AGREEMENT:** This agreement covers Angeles Millwork & Lumber Co., Inc., Hartnagel Building Supply, Inc. and any affiliates.

**If this account is opened, I agree to the following terms:**

- Our statements cut-off on the last day of the month. **Balance is due IN FULL by the 10<sup>th</sup> of the month following purchases.** \_\_\_\_\_ Initial here
- Past due accounts are automatically placed on a "NO CHARGE" hold at both stores, until payment is received. \_\_\_\_\_ Initial here
- Interest is charged at 18% per annum, 1.5% per month on past due accounts.
- Customer agrees to pay collection costs and/or attorney's fees in the event that collection efforts become necessary.
- Customer authorized release of credit information necessary for approval of this application.

I understand that **eStatements** will be **emailed** on the first work day of each month to the account owner and/or a bookkeeper and **invoices** are emailed throughout the month at the time of invoicing.  **Opt out.** We prefer mailed paper statements. \_\_\_\_\_ Initial here

**YES**, please sign us up for **iNet** - online access to account balances and invoices (with the exception of 9-10pm daily for system maintenance).

I (we) certify that the above information is true and correct, and that we can comply with your terms. This application is to be signed only by those in a position to guarantee the performance of the applicant of the company. *APPLICATION PROCESSING IN SOME CASES MAY TAKE UP TO 2 WEEKS.*

**Signature of Applicant(s)**

**Print Name & Title**

\_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
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