



Wind Mill Woodworking, LLC

dba Wind Mill Slatwall Products
200 Balsam Rd • Sheboygan Falls WI 53085

Credit Application

Date _____

PLEASE ALLOW 5-7 BUSINESS DAYS FOR PROCESSING

BUSINESS CONTACT INFORMATION

Company Legal Name: _____ Phone: _____
 DBA: _____ Fax: _____
 Email: _____ Website: _____
 Headquarters Address: _____
 City: _____ State: _____ Zip: _____
 In Business Since: _____ Business Type: (circle one) Sole Proprietorship Partnership Corporation Other
 Accounting Contact: _____ Accounting e-mail: _____

BUSINESS/CREDIT INFORMATION

CREDIT AMOUNT REQUESTED \$ _____

Primary Business Address: _____
 City: _____ State: _____ Zip: _____
 How Long at Current Address: _____ Years Email: _____
 Business Phone: _____ FEIN: _____
 Business Fax: _____ Duns#: _____
 Bank Name: _____
 Bank Address: _____ Bank Phone: _____
 Bank City/St/Zip: _____ Contact: _____
 Checking Account # _____

BUSINESS/TRADE REFERENCES (may attach sheet)

Company Name: _____ Phone: _____
 Address: _____ Fax: _____
 City: _____ State: _____ Zip: _____
 Email: _____

Company Name: _____ Phone: _____
 Address: _____ Fax: _____
 City: _____ State: _____ Zip: _____
 Email: _____

Company Name: _____ Phone: _____
 Address: _____ Fax: _____
 City: _____ State: _____ Zip: _____
 Email: _____

AGREEMENT

1. Customer agrees to return an initialled and dated Terms and Conditions as attached herein.
2. By submitting this application, Customer authorizes Wind Mill Woodworking, Inc. to make inquiries to the banking and business/trade references supplied.
3. New Customers agree to pay by valid credit card or check in advance until approval of the signed credit application.
4. Customer agrees to provide valid State Resale Number(s), if applicable to purchase.

AUTHORIZATION

Signature: _____ Title: _____
 COMPANY OFFICER
 Printed: _____ Date: _____