

## PERSONAL ACCOUNT APPLICATION

### APPLICANT

NAME	YEARS AT PRESENT ADDRESS <input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> BOARD		
STREET ADDRESS	MONTHLY PAYMENT FOR HOUSING		
CITY	STATE	ZIP	
TELEPHONE NO.	EMAIL		
SOCIAL SECURITY NO.	BIRTH DATE	DRIVER'S LICENSE NO.	NO. DEPENDENTS <small>(Excluding Self)</small>
PRESENT EMPLOYER	EMPLOYER'S ADDRESS		
OCCUPATION	YEARS THERE	MONTHLY INCOME \$	
OTHER INCOME <small>(Optional)</small>	SOURCE: <small>(Alimony, child support or separate maintenance income need not be revealed if you do not desire such income to be considered)</small>		

### COMPLETE ONLY:

1. For a joint account. 2. If applicant is applying for an individual account and wants to rely on spouse's income to repay credit extended.	
IS THIS AN APPLICATION FOR A JOINT ACCOUNT? <input type="checkbox"/> YES <input type="checkbox"/> NO	
ADDITIONAL PERSON'S NAME	
RELATIONSHIP	
SOCIAL SECURITY NO.	
PHONE NO. <small>(Area Code)</small>	
ADDITIONAL PERSON'S OCCUPATION	
EMPLOYER'S NAME	
EMPLOYER'S ADDRESS	
YEARS THERE	MONTHLY INCOME \$

### CREDIT REFERENCES

LIST BANKS, FINANCE COMPANIES, CREDIT CARDS, DEPT. STORES. (OPEN OR CLOSED)

NAME OF CREDIT REFERENCE	ADDRESS	PHONE NUMBER

SAVINGS ACCT. # WHERE     
  CHECKING ACCT. # WHERE     
  MORTGAGE WHERE     
  AUTO LOAN WHERE     
 MONTHLY PAYMENT: \_\_\_\_\_  
 MONTHLY PAYMENT: \_\_\_\_\_

### APPLICANT'S SIGNATURE(S)

NOTE: BOTH SIGNATURES ARE REQUIRED ONLY FOR A JOINT ACCOUNT OR WHERE YOU ARE RELYING ON A SPOUSES INCOME TO REPAY CREDIT EXTENDED

The undersigned Applicant(s) hereby provides the above information for the purpose of obtaining credit and authorizes the obtaining of information concerning any statement made herein and the investigation of credit worthiness of the Applicant(s). Consumer reports may be requested in connection with the processing of this application and subsequently pursuant to the Fair Credit Reporting Act. Upon request, J. Wright Building Center, Inc. ("Wright Building Center") will inform Applicant(s) of the names and addresses of any consumer reporting agencies that have provided such reports. Applicant(s) agrees to be bound by the terms and conditions set forth in the following credit policy: All accounts are billed monthly, and payment is due in full by the 10th of the month following a credit purchase. By signing this credit agreement, Applicant(s) accepts responsibility and agrees to pay for every invoice that is charged to the account. The Applicant(s) will be jointly and severally liable for all credits advanced as a result of all charges against the account (including, but not limited to, unauthorized use of the account) and that the charges were the duly authorized act of and are binding upon the applicant(s). Any and all such requests and agreements shall remain in full force and effect until written notice of the amendment, rescission or termination thereof has been delivered to and receipted for by Wright Building Center. A 1.5% per month late charge is added to delinquent accounts. Accounts are considered delinquent on the 11th day of the month following a credit purchase if payment is not received. In the event an account is delinquent, additional charges will be added for costs, expenses, and attorneys and other fees paid or incurred or adjudged by a court, as a consequence of nonpayment including all reasonable cost of collection, including costs and expenses of attorneys fees towards the collection and enforcement of the obligation to pay, whether suit is filed or not. If credit is required for a period of time exceeding 30 days, arrangements must be made with a bank or other financing agency in advance.

SIGNATURE \_\_\_\_\_ SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(Additional Party)

**ACCOUNT QUESTIONS**

**Hold tight, just a few more questions.**

**1 Delivery Address.** Is your delivery address different than your mailing address? Example; rental property, new construction or shop address. If different, please note below

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**2 Cell Phone & First Name:** Please list all authorized users. This is all the room available.

**Cell Phone (do not include 618)**

**First Name**

Cell Phone (do not include 618)							First Name													

**3 Statements:** Mailed or Emailed (note email address below)

Statements are sent out monthly; they are processed on the 1st of each. When the first falls on a weekend or holiday, statements will be processed on the Monday after. Please note that your monthly statement does not include a break down of each invoice.

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**4 Emailed Invoices:** Yes or No  
Emails are sent out at the time of purchase.

**5 Account Access:** Yes or No  
24-7 access to your account; login to view invoices, credits, statements and payments.

**6 Payment:** Statement balance is due in full on the 10th of each month.