## APPLICATION FOR CREDIT

***PLEASE FILL IN ALL BLANKS. PLEASE PRINT OR TYPE.***

DATE **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

PLEASE CIRCLE THE NAME OF THE COMPANY/IES YOU APPLYING FOR: NORTHWIND RAS, LLC; SOUTHWIND RAS, LLC; BLUFF CITY MATERIALS, LLC; SOUTHWIND MATERIALS, LLC; RELIABLE MATERIALS LYONS, LLC; RELIABLE ASPHALT CORPORATION.

TRADE NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE \_\_\_\_\_\_\_\_\_ ZIP CODE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TELEPHONE # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FAX # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LENGTH OF TIME IN BUSINESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TYPE OF BUSINESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IS THIS A: CORPORATION \_\_\_\_\_\_\_\_\_\_\_\_\_ PARTNERSHIP \_\_\_\_\_\_\_\_\_\_\_\_\_ SOLE OWNER \_\_\_\_\_\_\_\_\_\_\_\_\_\_

PREVIOUS AFFILIATION, IF ANY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TRADE REFERENCES:**

1. NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE \_\_\_\_\_\_\_\_\_ ZIP CODE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TELEPHONE # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FAX # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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CITY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE \_\_\_\_\_\_\_\_\_ ZIP CODE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TELEPHONE # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FAX # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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CITY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE \_\_\_\_\_\_\_\_\_ ZIP CODE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TELEPHONE # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FAX # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL: [APPS@BLUFFCITYMATERIALS.COM](mailto:APPS@BLUFFCITYMATERIALS.COM)

**NAME OF COMPANY OFFICERS AND / OR OWNERS:**

1. NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

POSITION \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TELEPHONE # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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POSITION \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TELEPHONE # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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POSITION \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TELEPHONE # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NAME/EMAIL OF PERSON APPLYING FOR APPLICATION:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PERSONAL GUARANTEE FORM**

**TO: BLUFF CITY MATERIALS, INC., SOUTHWIND MATERIALS, LLC, SOUTHWIND RAS, LLC, NORTHWIND RAS, LLC, RELIABLE MATERIALS LYONS, LLC, RELIABLE ASPHALT CORPORATION AND ITS SUCCESSORS AND/OR ASSIGNS**

##### In consideration of the further extension of credit granted by **BLUFF CITY MATERIALS, INC., SOUTHWIND MATERIALS, LLC, SOUTHWIND RAS, LLC, NORTHWIND RAS, LLC, RELIABLE MATERIALS LYONS, LLC, RELIABLE ASPHALT CORPORATION\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** (name of account), I hereby personally, individually and unconditionally guarantee payment of whatever amount which at any time shall be owing to **BLUFF CITY MATERIALS, INC., SOUTHWIND MATERIALS, LLC, SOUTHWIND RAS, LLC, NORTHWIND RAS, LLC, RELIABLE MATERIALS LYONS, LLC, RELIABLE ASPHALT CORPORATION** on account of goods, delivered, whether such indebtedness is incurred before or after the date hereof. This is a continuing guarantee relating to any indebtedness, including that arising under successive transactions, which shall either continue the indebtedness or from time to time renew it after it has been satisfied, and this guarantee shall be perpetual as to any indebtedness incurred before written notice is received by **BLUFF CITY MATERIALS, INC., SOUTHWIND MATERIALS, LLC, SOUTHWIND RAS, LLC, NORTHWIND RAS, LLC, RELIABLE MATERIALS LYONS, LLC, RELIABLE ASPHALT CORPORATION,** that I am unwilling to guarantee any additional indebtedness on this account.

As Guarantor I hereby waive notice as to the amount of the account and further I understand that a finance charge of one and one half percent (1½%) per month will be applied to any balance outstanding thirty (30) days or more, plus reasonable attorney’s fees incurred in the collection of any sums due to **BLUFF CITY MATERIALS, INC., SOUTHWIND MATERIALS, LLC, SOUTHWIND RAS, LLC, NORTHWIND RAS, LLC, RELIABLE MATERIALS LYONS, LLC, RELIABLE ASPHALT CORPORATION,** which are herein guaranteed.

DATED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OWNER/PRESIDENT SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PRINT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TITLE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SEAL

**NOTARY PUBLIC**

My commission expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SALES TAX DEDUCTION FORM**

PLEASE HAVE AN **OFFICER OF THE COMPANY** SIGN THE AFFIDAVIT BELOW. **THE AFFIDAVIT MUST NOTARIZED.** RETURN THE COMPLETED AFFIDAVIT TO OUR OFFICE AS SOON AS POSSIBLE. YOUR FAILURE TO COMPLETE AND RETURN THIS AFFIDAVIT WILL RESULT IN YOUR LIABILITY FOR ANY SALES TAX DEDUCTIONS. THANK YOU FOR YOUR COOPERATION. All sales will summarily be charged sales tax until this form is properly filled out and received by us.

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This is to certify that **BLUFF CITY MATERIALS, INC., SOUTHWIND MATERIALS, LLC, SOUTHWIND RAS, LLC, NORTHWIND RAS, LLC, RELIABLE MATERIALS LYONS, LLC, RELIABLE ASPHALT CORPORATION,** agree/s to furnish materials to the undersigned for this calendar year based upon the following conditions:

1. Upon signature by the undersigned, it is being represented that the materials purchased during this calendar year that are to be used for jobs which **DO NOT** have a tax exempt status (i.e., charitable, religious, educational, or municipal organizations within the meaning of the Illinois Retailers’ Occupation Tax) will be charged the applicable sales tax.

2. Where said materials are to be used for jobs which **DO** have a tax-exempt status (as identified above), it is incumbent upon the undersigned to notify **BLUFF CITY MATERIALS, INC., SOUTHWIND MATERIALS, LLC, SOUTHWIND RAS, LLC, NORTHWIND RAS, LLC, RELIABLE MATERIALS LYONS, LLC, RELIABLE ASPHALT CORPORATION,** of this status. Any deviation from this requirement will subject the undersigned to full responsibility for any results thereof, including payment of applicable taxes and any taxes and/or penalties resulting from an Illinois State audit which might disallow any of your jobs as having a tax-exempt status.

This affidavit shall be considered a part of each order that we receive from your company.

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

OWNER/PRESIDENT SIGNATURE

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

PRINT NAME AND TITLE

Subscribed and sworn to before me this \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SEAL

**NOTARY PUBLIC**

My commission expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_