



COMPANY INFORMATION:

Company OR Individual's Name: _____ Contractor's Lic #: _____

Billing Address: _____ City/ State/ Zip _____

Street Address: _____ City/ State/ Zip _____

Phone #: _____ Fax #: _____ E-mail: _____

Cell Phone #: _____ Fed ID#: _____ Years in Business _____

Form of Business: () Proprietorship () Partnership () Corporation

Parent Company (if any): _____

Street Address: _____ Phone #: _____

Company Owner/s _____ Phone #: _____

JOB SITE INFORMATION:

Job site: _____

Address: _____

Property Owner: _____ Phone/ Cell #: _____

Address: _____

Job-site contact: _____ Phone/ Cell #: _____

Bonding Co/ Address: _____

Bond#: _____ Phone #: _____

GENERAL CONTRACTOR INFORMATION:

Company OR Individual's Name: _____ Phone/ Cell #: _____

Address: _____ City/ State/ Zip _____

Phone/ Cell #: _____ Fax #: _____

CONSTRUCTION LENDER INFORMATION:

Company OR Individual's Name: _____

Address: _____ City/ State/ Zip _____

Phone/ Cell #: _____ Fax #: _____



BANK REFERENCE:

Bank Name/Branch _____
 Address: _____ City/ State/ Zip _____
 Phone#: _____ Account#: _____
 Fax#: _____ Contact Name: _____

TRADE REFERENCES:

Company: _____	Company: _____
Address: _____	Address: _____
Phone #: _____	Phone #: _____
Fax #: _____	Fax #: _____
Account #: _____	Account #: _____
Company: _____	Company: _____
Address: _____	Address: _____
Phone #: _____	Phone #: _____
Fax #: _____	Fax #: _____
Account #: _____	Account #: _____

AUTHORIZATION TO RELEASE BANK AND TRADE INFORMATION/ TERMS:

I hereby authorize the above listed bank and suppliers to disclose any reasonable information requested for the purpose of granting credit to my/our firm. Should it become necessary to collect this account through any attorney, by legal proceedings or otherwise, the undersigned, including endorsers, promise to pay all cost of collection, including attorney's fee.

I understand that Atlas Performance Industries' terms are Net due upon receipt.
 API to hold the information above in complete confidence.

Date: _____ Signature: _____ Title: _____
 Must be owner, officer or partner

PERSONAL GUARANTEE:

In consideration for the extension of credit by API to: _____
 undersigned individual, do personally guarantee the payment of any and all sums due on said account, including collection costs, service charges and attorney's fees within thirty days of demand for same by API. In the event of suit, venue & jurisdiction will take place in Santa Barbara County, or in the judicial district where delivery originates, at the option of API. I consent to an investigation of my personal credit by API.

Dated: _____

_____ GUARANTOR'S SIGNATURE	_____ PRINTED NAME	_____ HOME ADDRESS
_____ SOCIAL SECURITY NO.		_____ CITY/STATE
_____ DRIVER'S LICENSE NO.		_____ HOME PHONE