

HOLT LUMBER COMPANY

P.O. Box 345
231 Belmont Street
Carbondale, PA 18407
Phone 570-282-4400
Fax 570-282-1870

HOLT LUMBER HOUSE ACCOUNT TERMS AND CONDITIONS

BALANCE ON ALL ACCOUNTS IS DUE IN FULL BY THE 10th OF EACH MONTH. DELINQUENT ACCOUNTS ARE SUBJECT TO A SERVICE CHARGE OF 1½ % PER MONTH WHICH CALCULATES TO AN ANNUAL PERCENTAGE RATE OF 18%. SHOULD YOU REACH YOUR CREDIT LIMIT, YOU WILL NEED TO MAKE A PAYMENT BEFORE ANY FURTHER CHARGES ARE ALLOWED. ALSO, SHOULD YOUR ACCOUNT BECOME DELINQUENT FOR 60 DAYS, YOUR CHARGE PRIVILEGES WILL BE SUSPENDED. CUSTOMER IS LIABLE FOR ALL LEGAL AND COLLECTION FEES ON ALL ACCOUNTS TURNED OVER FOR COLLECTION.

WE OFFER SCHEDULED DELIVERY SERVICE TO CUSTOMERS IN OUR NORMAL TRADING AREAS. THERE IS A \$7.95 SERVICE CHARGE FOR DELIVERY VIA OUR DELIVERY TRUCKS (SUBJECT TO CHANGE WITHOUT NOTICE). THE MINIMUM ORDER FOR SHIPPING IS \$100.00. MOST ORDERS PLACED BY 8:00 A.M. (M-F) WILL BE DELIVERED THAT DAY. THERE IS NO SUNDAY DELIVERY SERVICE.

WE RESERVE THE RIGHT TO SHIP SMALL ORDERS VIA UPS OR COMMON CARRIER AT THE CUSTOMER'S EXPENSE. MINIMUM INVOICE \$25.00.

THERE CANNOT BE ANY CANCELLATIONS OR CHANGES ON WINDOW UNITS, EXTERIOR OR INTERIOR DOOR UNITS, KITCHEN AND BATH CABINETRY, COUNTER TOPS OR ANY OTHER "SPECIAL ORDERS" ONCE PRODUCTION HAS BEEN BEGUN BY US OR BY OUR SUPPLIER. ALL SPECIAL ORDERS REQUIRE A 50% DEPOSIT. ALL SPECIAL ORDERS ARE NON-RETURNABLE. SPECIAL ORDER ITEMS CANNOT BE CANCELED OR CHANGED ONCE ORDERED.

ESTIMATE AND PRICING POLICY-PRICES ARE SUBJECT TO CHANGE WITHOUT NOTICE. HOLT LUMBER COMPANY ASSUMES NO RESPONSIBILITY FOR ACCURACY OF TAKE OFFS FROM DRAWINGS OR BLUEPRINTS FROM THE CUSTOMER. FURTHERMORE, HOLT LUMBER COMPANY ASSUMES NO RESPONSIBILITY FOR THE PRODUCTS LISTED BEING SUFFICIENT TO COMPLETE THE CUSTOMER'S INTENDED PROJECT. ALL PRICES QUOTED ARE BASED UPON THE TOTAL PACKAGE PRICE AND ARE SUBJECT TO CHANGE IF THE PACKAGES CHANGES.

CLAIMS OF SHORTAGES, ERRORS, AND DAMAGED MATERIALS MUST BE NOTED ON BOTH COPIES OF DELIVERY RECEIPTS. WE CANNOT ASSUME RESPONSIBILITY FOR CLAIMS AFTER DELIVERY RECEIPT IS SIGNED BY YOU OR YOUR EMPLOYEE AS BEING RECEIVED IN GOOD CONDITION.

RETURNED MATERIALS-STOCK MATERIAL PURCHASED FROM US WILL NOT BE ACCEPTED WHEN RETURNED FOR CREDIT SUBJECT TO THE FOLLOWING CONDITIONS:

- 1. MATERIAL TO BE RETURNED MUST BE IN GOOD CONDITION AND IS SUBJECT TO OUR IMMEDIATE INSPECTION.**
- 2. THE ORIGINAL INVOICE RECEIPT WITH THE DATE AND NUMBER COVERING THE ORIGINAL PURCHASE OF MATERIAL FROM US MUST BE SUPPLIED BEFORE ANY AUTHORIZATION WILL BE GIVEN FOR THE RETURN OF SUCH MATERIAL AND BEFORE ANY CREDIT WILL BE ISSUED.**
- 3. CREDIT, WHEN ALLOWED, WILL BE ISSUED ON THE ORIGINAL INVOICE PRICE, LESS A 10% RESTOCKING CHARGE.**
- 4. CREDIT WILL BE ALLOWED ONLY ON MATERIAL IN GOOD CONDITION THAT IS RETURNED WITHIN 30 DAYS AND AFTER OUR INSPECTION.**
- 5. RETURNS ON MATERIAL THAT IS 31 DAYS OR MORE AFTER THE ORIGINAL RECEIPT DATE WILL BE CHARGED A 35% RESTOCKING CHARGE AND IS SUBJECT TO OUR INSPECTION.**
- 6. POSITIVELY NO CREDIT WILL BE ALLOWED ON THE RETURN OF MERCHANDISE THAT HAS BEEN DRILLED, INSTALLED, OR ALTERED IN ANY WAY AFTER DELIVERY AND THE MATERIAL WILL BE RETURNED TO THE CUSTOMER.**
- 7. IF YOU ORDER MATERIAL AND REFUSE THE MATERIAL UPON DELIVERY, YOU WILL BE CHARGED A 20% RESTOCKING CHARGE.**
- 8. SPECIAL-ORDER ITEMS ARE NON-RETURNABLE.**

I/WE UNDERSTAND AND AGREE TO HOLT LUMBER COMPANY'S HOUSE ACCOUNT TERMS AND CONDITIONS.

DATE

TITLE

* _____
PRINT NAME

* _____
AUTHORIZED SIGNATURE

DATE

TITLE

* _____
PRINT NAME

* _____
AUTHORIZED SIGNATURE

HOLT LUMBER COMPANY

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HOLT LUMBER HOUSE ACCOUNT APPLICATION

DATE: _____

BUSINESS NAME: _____

CUSTOMER NAME: _____

BILLING ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

TELEPHONE #: () _____ **FAX #:** () _____

***SOCIAL SECURITY #:** _____

***DRIVER'S LICENSE #:** _____ ***DATE OF BIRTH:** _____

ALL OF THE FOLLOWING MUST BE COMPLETED IF THIS ACCOUNT IS FOR A BUSINESS

TYPE OF BUSINESS:

- () PROPRIETORSHIP
- () PARTNERSHIP
- () CORPORATION

DATE BUSINESS ESTABLISHED: _____

STATE WHERE INCORPORATED: _____ **DATE OF INCORPORATION:** _____

TAX EXEMPT #: _____ **FEDERAL I. D. #:** _____

NUMBER OF YEARS IN BUSINESS: _____

ANTICIPATED MONTHLY PURCHASES FROM HOLT LUMBER COMPANY: _____

PERSON (S) RESPONSIBLE FOR ACCOUNTS PAYABLE:

<u>NAME</u>	<u>TITLE</u>	<u>PHONE # (EXT.)</u>
_____	_____	_____
_____	_____	_____

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HOLT LUMBER HOUSE ACCOUNT APPLICATION

NAME OF OWNERS OR OFFICERS:

<u>TITLE</u>	<u>NAME</u>	<u>SOC. SEC. #</u>	<u>ADDRESS</u>	<u>PHONE#</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

TRADE REFERENCES:

<u>COMPANY</u>	<u>ADDRESS</u>	<u>PHONE #</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____

BANK REFERENCES:

BANK NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE #: _____ FAX #: _____

WILL PURCHASE ORDERS BE REQUIRED FOR PURCHASES? _____

IT IS UNDERSTOOD AND AGREED THAT PAST DUE BALANCES ARE SUBJECT TO A SERVICE CHARGE WHICH SHALL BE 1½ % PER MONTH WHICH CALCULATES TO AN ANNUAL PERCENTAGE RATE OF 18%. IN CONSIDERATION FOR THE EXTENSION OF CREDIT TO THE ABOVE NAMED CORPORATION, COMPANY OR INDIVIDUAL, I/WE PERSONALLY GUARANTEE PAYMENT OF ALL PURCHASES MADE ON BEHALF OF THE ABOVE NAMED CORPORATION, COMPANY OR INDIVIDUAL.

WE VERIFY YOUR CREDIT HISTORY, REFERENCES, AND OTHER SOURCES OF INFORMATION TO DETERMINE YOUR CREDIT CAPACITY.

EACH MONTH YOU WILL RECEIVE A MONTHLY BILLING STATEMENT. THE BALANCE IS DUE IN FULL BY THE 10th OF THAT MONTH. PLEASE KEEP ALL PRINTED COPIES OF YOUR INVOICES FOR PURCHASES MADE AT HOLT LUMBER COMPANY BECAUSE HOLT LUMBER COMPANY DOES NOT SEND OUT INVOICES WITH THE MONTHLY BILLING STATEMENT. YOU CAN SIGN UP FOR E-INVOICES WHEREIN YOUR INVOICES WILL BE SENT TO YOUR E-MAIL MOMENTS AFTER YOU MAKE A PURCHASE AND YOU WILL HAVE A COPY FOR YOUR RECORDS. IF YOU WOULD LIKE TO SUBSCRIBE TO E-INVOICES, PLEASE PROVIDE YOUR NAME AND E-MAIL ADDRESS ON THE NEXT PAGE. YOU MAY PROVIDE MORE THAN ONE E-MAIL ADDRESS.

**I/WE UNDERSTAND AND AGREE TO THE ABOVE TERMS AND CONDITIONS OF
HOLT LUMBER COMPANY'S HOUSE ACCOUNT APPLICATION.**

DATE

TITLE

* _____
PRINT NAME

* _____
AUTHORIZED SIGNATURE

DATE

TITLE

* _____
PRINT NAME

* _____
AUTHORIZED SIGNATURE

I would like to subscribe to E-Invoices.

Name (Print)

E-Mail Address (Print)

Additional E-Mail Address(es) (Print)