



High Performance Roofing Underlayment

Lemminkainen Rakennusyhtymä OY

c/o Nemco Industries Inc.

4655 Caulfeild Dr, West Vancouver, BC, V7W 1E9, Canada

Tel #604 922 5481 Fax 604 922 4271

## CREDIT APPLICATION

\_\_\_\_\_  
LEGAL NAME OF COMPANY

\_\_\_\_\_  
STREET ADDRESS, CITY/STATE, ZIP CODE

PHONE #: (     ) \_\_\_\_\_ FAX #: (     ) \_\_\_\_\_

YEARS IN BUSINESS \_\_\_\_\_

OWNERSHIP STATUS: \_\_\_ INDIVIDUAL \_\_\_ PARTNERSHIP  
(IF LIMITED PARTNERSHIP, ATTACH STATEMENT OF LIMITATION)

\_\_\_ CORPORATION \_\_\_ DATE OF INCORPORATION \_\_\_ STATE OF INCORPORATION

### PRINCIPALS

1. \_\_\_\_\_  
FULL NAME, TITLE SOCIAL SECURITY #, HOME PHONE

\_\_\_\_\_  
HOME STREET ADDRESS CITY/STATE ZIP CODE

2. \_\_\_\_\_  
FULL NAME, TITLE SOCIAL SECURITY #, HOME PHONE

\_\_\_\_\_  
HOME STREET ADDRESS, CITY/STATE, ZIP CODE

**BANK REFERENCES**

1. \_\_\_\_\_  
**BANK NAME & OFFICER IN CHARGE**

\_\_\_\_\_  
**STREET ADDRESS, CITY/STATE ,ZIP CODE**

**PHONE #:** (    ) \_\_\_\_\_ **ACCOUNT#:** \_\_\_\_\_

2. \_\_\_\_\_  
**BANK NAME & OFFICER IN CHARGE**

\_\_\_\_\_  
**STREET ADDRESS CITY/STATE ZIP CODE**

**PHONE#:** (    ) \_\_\_\_\_

**ACCOUNT #:** \_\_\_\_\_

**TRADE REFERENCES**

1. \_\_\_\_\_  
**NAME, PHONE, FAX**

\_\_\_\_\_  
**STREET ADDRESS, CITY/STATE, ZIP CODE**

2. \_\_\_\_\_ (    ) \_\_\_\_\_  
**NAME, PHONE, FAX**

\_\_\_\_\_  
**STREET ADDRESS CITY/STATE ZIP CODE**

3. \_\_\_\_\_ (    ) \_\_\_\_\_  
**NAME, PHONE, FAX**

\_\_\_\_\_  
**STREET ADDRESS, CITY/STATE, ZIP CODE**

**GENERAL INFORMATION BUILDING: OWN \_\_\_\_\_ RENT \_\_\_\_\_**  
**NUMBER OF EMPLOYEES \_\_\_\_\_**

The undersigned applicant for credit, by execution of this application, warrants and represents that the statements of fact furnished heron are true and correct. Nemco Industries Inc has our unqualified permission to contact the above named bank(s) and/or trade references for the purpose of asking for credit information. Any information resulting from these contacts will be held in strict confidence.

See our separate Sales and Payment Terms. We fully understand your credit terms and agree to the proper payment in consideration of extended credit.

\_\_\_\_\_  
**NAME OF FIRM**

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

\_\_\_\_\_  
**SIGNATURE OF OFFICER PRINTED NAME**

\_\_\_\_\_  
**TITLE**