

(225) 638-8537 2600 Hospital Rd New Roads, LA 70760 Matt@fontainelbr.com

	C	ONSUMER CREDIT APPLICA	TION	
CONSUMER NAME/S:				
DELIVERY ADDRESS:				
BILLING ADDRESS:				
TELEPHONE NUMBER:		CELL NUMBER:	ADD'L NUMBER:	
PURPOSE OF ACCOUNT:				
EMAIL ADDRESS:				
BUYERS LIST:	YES(WRITE NAMES	ON BACK OF APPLICATION) NO_		
FINANCIAL BANK, ADDRES	s,			
TELEPHONE NUMBER:				
REPRESENTATIVE:				
Place of employment:	-			
v		CREDIT CONTRACT		
The information above is submitte	ed to Fontaine Lumber Co. Inc fo	r purposes of obtaining credit. I (We) per	mit any information to he	
		NET10TH AND PAYMENT MUST BE RECE		We) agree
to pay sums due to Fontaine Lum	ber Co plus any fees incurred to	collect my (our) account in the event of a	delinquency, plus interest at 1.5% per mo	onth on the principal
due (18% APR), plus attorney's fee	es in the amount of 25% of the b	alance due, including late fees, charges, o	and expense of	
collection. I (We) further agree to	venue and jurisdiction in Pointe	Coupee Parish and The City of New Road	ds Court. In the event of any litigation ar	rising out of or
relating to this agreement, I (we)	agree the hearing locale for any	such lawsuit will be The City of New Roo	ads Court , or if the amount in dispute ex	ceeds the
jurisdictional amount of The City	of New Roads Court , the hearing	g locale shall be Pointe Coupee Parish. In	the event of any claim for defective ma	terial,
Fontaine Lumber Co will replace o	any material proven defective by	applicant for a period of 90 days from n	nanufacturer and no claim may	
be brought against Fontaine Lum	ber Co.			
		arantees, at all times, full and prompt pa		
indebtedness that may be incurre	d by commercial consumer appl	ying for credit. This is to be a continuing	guarantee, and the extension of time	
payment or the acceptance of any	y sum or sums on account, or the	e acceptance of notes, drafts, or any secu	rity from the guaranteed party to this	
		iarantee which I (we) am/are hereby exe		ault, Fontaine Lumber
,	l against me (us) at any time, wi	thout any notice. I (We) have read and u	nderstand the	
terms of this guarantee SIGNAT	rure:	PRINT NAME:	TITLE	DATE:
FLC OWNER S	SIGNATURE:	FLC PRINT NAME:	TITLE:	DATF:



## Consumer Credit References (3):

		Account Number	
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3. ———			_