



| Full Legal Name<br>Of Business   |   |   | ·  | Date   |   |
|--|---|---|--|--|---|
| Address  |   |   |  |  | ne  |
| City   |   | State   | Zip  |  |   |
| Date Established   |   | Resale Tax  | #  |  |   |
| President  | S   | Social Security #   | Reside   | nce Address  |   |
| Vice President   | 5   | Social Security #   | Reside   | nce Address  |   |
| Secretary  | S   | Social Security#  | Reside   | nce Address  |   |
| Treasurer  | S   | Social Security #   | Reside   | nce Address  |   |
| Accounts Payable Contact _   |   |   |  |  |   |
| Amount of Credit Requested   |   |   |  |  |   |
| Bank Name  |   |   |  |  |   |
| Address  |   |   |  |  |   |
|  |   |   |  |  |   |
|  |   |   |  |  |   |
| Bankers Name   |   |   |  | _Fax   |   |
|  |   |   | SINESS REFERENC  |  |   |
| Name   |   |   |  | _Phone   |   |
| Address  |   |   |  | _Fax   |   |
|  |   |   | Contact Person   |  |   |
| Name   |   |   |  | _Phone   |   |
| Address  |   |   |  | _Fax   |   |
| City   | State   | Zip   | Contact Person   |  |   |
| Name   |   |   |  | _Phone   |   |
| Address  |   |   |  | _Fax   |   |
| <b>Lity</b> ne above information is being submitted for  | Stateor the purpose of allow  | Zip_<br>wing Lee's Precast Concrete   | Contact Person   |  | undersigned account. The undersigned hereby   |
| presents and warrants that the information ontact and investigate the references, inclithin the terms specified on the face of the | on contained herein, or<br>luding the banks, liste<br>invoice. If payment is<br>aw, of the unpaid del | r submitted in connection he<br>ed above and we authorize<br>not received when due, the<br>linquent balance until the a | erewith, is true and complete a<br>the references to release the<br>undersigned also agrees to p | as of the date hereof. We he requested information. The pay a monthly service charge | ereby authorize Lee's Precast Concrete, Inc. to<br>e undersigned hereby agrees to remit payment<br>e equal to one and one half (1 ½) percent of the<br>stion, the undersigned agrees to pay all costs |
| NAME (Please Print)  |   | SIGNATURE   |  |  | TITLE   |



## **AUTHORIZATION FOR RELEASE OF CREDIT INFORMATION**

20578 Egypt Rd. Aberdeen, MS 39730 Ph: (662) 369-8935 Fax: (662) 369-9783

| Date   |
|--|
| TO WHOM IT MAY CONCERN:  |
| The undersigned has made application to Lee's Precast Concrete, Inc. for a commercial credit line, and hereby authorizes Lee's Precast Concrete, Inc. to obtain from any credit-reporting agency any credit report relating to the undersigned which Lee's Precast Concrete, Inc. may deem necessary for evaluating the commercial credit line requested by the undersigned. |
| The undersigned hereby authorized any bank, or other lender or grantor of credit, to provide Lee's Precast Concrete, Inc. information regarding the character, reputation, financial responsibility and indebtedness of the undersigned as requested by Lee's Precast Concrete, Inc. for the purpose of evaluating the commercial credit request of the undersigned.         |
| The undersigned hereby released Lee's Precast Concrete, Inc. and any lender or grantor of credit from any and all claims or causes of action that may arise or which he/she might have by reason of information furnished Lee's Precast Concrete, Inc. by a credit-reporting agency or by a bank or other lender or grantor of credit.                                       |
| BUSINESS NAME/TRADE STYLE  |
| BY (SIGNATURE) TITLE   |