



Credit Application

37 Westgate Ave.
 Dickinson, ND 58601
 (701) 483-9175
 Fax: (701) 483-9174
 www.dickinsonreadymix.com

Date / /

COMPANY

Company Name:			Fed. ID No:		
DBA:		Phone:		Fax:	
Street Address:			# of Employees:		
City:	State:	Zip:	County/Use Tax Rate:		
Bus. Description:					
Years In Business:		(current ownership)		Bus. Structure: Corp <input type="checkbox"/> Prop. <input type="checkbox"/> P'Ship. <input type="checkbox"/>	
Contact:			Phone:		Fax:
E-mail:					
Requested Credit \$:		Project Details:			
AP Contact:		Phone:		Email:	

PRINCIPALS

Owner/President		Title		Soc. Sec. No.	
Home Address		City	State	Zip	% Ownership
Co-Owner/Officer		Title		Soc. Sec. No.	
Home Address		City	State	Zip	% Ownership

(If additional owners, please attach an additional sheet.)

BANK REFERENCES (Or attach copy of last 3 months bank statements)

Bank Name:		Phone		Fax	
Checking Acct. No.		Loan Acct. No		Officer	
Bank Name		Phone		Fax	
Checking Acct. No.		Loan Acct. No		Officer	

TRADE ACCOUNTS (Net-30 Accounts or Comparable Debt) (Please Provide Fax or Email)

Name	Phone	Fax or Email:
Name	Phone	Fax or Email:
Name	Phone	Fax or Email:

Dickinson Ready Mix Co. & Concrete Products are suppliers of: **Ready-Mixed Concrete, Aggregates, Logix ICF Forms, Retaining Wall Products, Concrete Block** and **Contractor Supplies**. We work with several other entities for all your building needs. Products manufactured include concrete, solid concrete blocks for retaining walls and misc. other forms as needed.

Products Division

Doug Braun
 Products Division Manager
doug.braun@dickinsonreadymix.com

Ready Mix Division

Scott Olin
 General Manager
 Ready Mix Division Manager
scott.olin@dickinsonreadymix.com



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Credit applicant name: _____

Consent to release information.

I agree that by submitting this form, I, the undersigned individual, recognizing that his or her individual credit history may be a factor in the evaluation of the credit of the applicant, hereby consents to and authorizes the named business credit provider and any assignee, lender, or funding service that may be utilized to obtain and use a consumer credit report on the undersigned, now and from time to time, as may be needed in the credit evaluation and review process and waives any right or claim they would otherwise have under Fair Credit Reporting Act in the absence of this continuing consent.

Applicants signature: _____ Print Name: _____ Date: _____

The applicant listed above has given us your name for a credit reference. At your earliest convenience please complete the form and return by fax or email accounting@dickinsonreadymix.com.

To be completed by Vendors:

All information provided will be kept confidential.

IN BUSINESS SINCE: _____

DATE OF LAST SALE: _____

TERMS: _____

RECENT HIGH CREDIT: _____

PRESENT BALANCE: _____

PAST DUE BALANCE: _____

PAYMENT TREND: () PROMPT () SLOW () WITHIN TERMS
() ANY NSF ACTIVITY

COMMENTS: _____

BUSINESS NAME COMPLETING FORM: _____

SIGNED BY: _____

DATE: _____

THANK YOU IN ADVANCE FOR YOUR COOPERATION.