

# ROAD WORK AHEAD



Traffic Services  
Equal Opportunity Employer  
729 Commercial Ave., Twin Falls, ID 83301  
(208) 734-4444  
225 W Franklin Rd, Meridian, ID 83642  
(208) 576-6542



DBA Twin Falls Signs - 818 Commercial Ave Twin Falls, ID 83301  
208-944-9144

## Application for Credit with Road Work Ahead Traffic Services Inc.

Credit Amount Requested: \_\_\_\_\_ Sales Representative: \_\_\_\_\_

Firm Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Shipping Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Alternate Number: \_\_\_\_\_ Website: \_\_\_\_\_

- Corporation      LLC      Resale Number: \_\_\_\_\_
- Partnership      General Contractor Number: \_\_\_\_\_
- Sole Proprietor      License Expiration Date: \_\_\_\_\_
- Government Entity      Tax Exempt ID Number: \_\_\_\_\_

List names and addresses of corporate officers, partners, and/or owner (Please use additional sheet if necessary.)

Name	Address	Phone	Social Security Number

### Business Information

Type of Business: \_\_\_\_\_

Years in Business: \_\_\_\_\_ Sales Volume: \_\_\_\_\_

Years at Business Address: \_\_\_\_\_ Locally Owned: \_\_\_\_\_

Number of Employees: \_\_\_\_\_ Cost of Rent: \_\_\_\_\_

Is Business Property Owned or Leased? \_\_\_\_\_ N

Email Address to send invoices to: \_\_\_\_\_

PO Required? Y      N

### Banking Information

Accounts Payable Contact: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Bank: \_\_\_\_\_ Branch Location: \_\_\_\_\_

Bank Address: \_\_\_\_\_

Bank Phone Number: \_\_\_\_\_ Bank Acct. No.: \_\_\_\_\_

## Trade References

**Vendor Name:** \_\_\_\_\_

Vendor Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

**Vendor Name:** \_\_\_\_\_

Vendor Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

**Vendor Name:** \_\_\_\_\_

Vendor Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

For Office Use Only

The Federal Equal Credit Opportunity Acts prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status; age (providing the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal agency that administers compliance with this law concerning this creditor is the Federal Trade Commission, Equal Credit Opportunity; Washington D.C. 20580.

If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain a statement, please contact (Accounts Receivable, P.O. Box 679, Twin Falls, ID 83303 or call 208-734-4444) within 30 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement.

Credit Terms | Credit Agreement:

By signing below, the Purchaser/Customer agrees to the following terms:

Note: This application for business credit is to be used in connection with commercial or business purposes and not for the purchase of personal, family, or household goods or services. You agree and represent and warrant at the time of each purchase, that this account shall be used only for purchases for commercial or business purposes, and you understand that the company is relying upon this representation in entering into this agreement. In this connection, you understand that your agreement not to use this account for personal, family, or household purposes means that important duties imposed upon us, and important rights conferred upon a consumer, pursuant to certain federal or state laws, will not apply to this account.

1. IF SALES ARE TAX EXEMPT, PLEASE ATTACH CERTIFICATE. By state law, Road Work Ahead Companies, (hereinafter "The Companies") will bill sales tax until an exemption certificate is received.
2. Maximum credit limit is determined by the respective Companies' credit departments.
3. Payment in full of all invoices is due and payable on the date specified on each invoice and payment must be sent directly to the Company issuing the invoice.
4. Balances not paid in full when due will incur FINANCE CHARGES at the rate of 1 1/2% per month, which is 18% ANNUAL PERCENTAGE RATE, from the date of the invoice until paid in full.
5. If the Purchaser/Customer defaults under the terms hereof, Purchaser/Customer agrees to pay all of the Companies costs of collection, including all litigation costs and attorney fees, whether or not suit is actually filed.
6. Mechanic's Lien filing fee is \$200.00 for each separate lien filed and will be charged to and paid by Purchaser/Customer as a cost of collection.
7. NOTICE TO IDAHO RESIDENTIAL OWNERS. If payment for materials provided by the Companies is not timely paid, the Companies may be entitled to file a mechanics lien against the real property which benefited from materials so provided, pursuant to Idaho Code 45-501, et seq. The companies may also be entitled to pursue claims against a payment bond filed on the construction project for which the materials were provided.

The above information is submitted for the purpose of obtaining credit and is warranted to be true. I hereby authorize and consent to allow the Companies and its authorized agents to investigate my personal and my companies credit and financial responsibility, including seeking information from credit bureaus, banks and others

<b>CUSTOMER / AUTHORIZED AGENT</b>	
I am an authorized agent of the person(s) / entity shown above on the front.	
SIGNATURE REQUIRED _____	DATE _____
PRINT NAME AND TITLE _____	

**PERSONAL GUARANTEE TO ROAD WORK AHEAD COMPANIES.**

In consideration of the extension of credit to the above-named Purchaser/Customer, the undersigned, as guarantor, hereby guaranties to the Companies that the above-named Purchaser/Customer will fully and properly perform its present and future obligations to the Companies. In the event of default by the above-named Purchaser/Customer, the undersigned agrees to pay all outstanding balances due, as well as all finance charges, attorney fees and costs incurred in due course of any collections action taken and all other obligations of the Purchaser/Customer as outlined in the Credit Agreement above. The undersigned waives protest, notice of delinquency and/or demand.

SIGNATURE REQUIRED \_\_\_\_\_ DATE \_\_\_\_\_  
(NO TITLE)

PRINT NAME \_\_\_\_\_

SIGNATURE REQUIRED \_\_\_\_\_ DATE \_\_\_\_\_  
(NO TITLE)

PRINT NAME \_\_\_\_\_

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www.roadworkaheadonline.com

www.twinfallssigns.com



### Consumer Credit Reference (Fillable by RWA/TF Signs representative)

To whom it may concern:

A mutual customer of ours, \_\_\_\_\_ has applied for an account with our company and has listed you as a reference. We would appreciate your cooperation in providing the information requested below. At the bottom of this page the customer has authorized you to release the information. Should you have any questions regarding this notice, please contact Shauna Peterson at 208-734-4444 or call the customer directly for verbal authorization to provide the information. We appreciate your help.

### Questionnaire (Fillable by reference)

Age of Account in Years: \_\_\_\_\_

Average Days to pay: \_\_\_\_\_

Current Credit Limit: \_\_\_\_\_

Highest Open Balance: \_\_\_\_\_

Terms: \_\_\_\_\_

Current Total of Aging invoices: \_\_\_\_\_

Have they ever stated to you that they have a policy in place disallowing them to pay finance charges? Y N

Please state any other information you wish for us to know: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of person filling out this form: \_\_\_\_\_

Position/Title: \_\_\_\_\_

Company: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### Customer Authorization (Fillable by customer)

I, \_\_\_\_\_ have applied for credit with Road Work Ahead Traffic Services/Twin Falls Signs. and have listed my account with your business as a reference. With my signature below, I grant permission for your business to release the information to with Road Work Ahead Traffic Services/Twin Falls Signs.

Signature: \_\_\_\_\_ Print: \_\_\_\_\_ Date: \_\_\_\_\_