



SPECIALTY MATERIALS

Arcosa Specialty Materials

(Please select subsidiary, if applicable)

JA Jack & Sons, Inc. Art Wilson Co

CREDIT APPLICATION

Pros. #:

1550 Double Drive Norman, OK 73069-8288

EMAIL FORM TO:

ar.acg@arcosa.com

Attn: Accts Receivable

T: (405) 366-9500

E: ar.acg@arcosa.com

Would you like to receive you invoice by: Email or Mail

PLEASE PRINT:

Incomplete applications will delay processing

APPLICANT INFORMATION

FULL NAME OF BUSINESS (APPLICANT) (INCLUDE ANY DBA NAMES)				* EIN/SOCIAL SECURITY #	
ADDRESS		EMAIL ADDRESS		TELEPHONE NUMBER	
CITY	STATE	POSTAL CODE	COUNTRY	YEAR ORGANIZATION STARTED	
AP CONTACT NAME		AP TELEPHONE NUMBER		AP EMAIL ADDRESS	
CUSTOMER ASSUMES STATE TAX LIABILITY UNLESS APPLICATION IS ACCOMPANIED BY SIGNED SALES USE TAX EXEMPTION CERTIFICATE FOR EACH STATE.					
ESTIMATED MONTHLY CREDIT REQUESTED (Required)	TAX STATUS	SALES TAX PERMIT # (attach copy)		DUNN & BRADSTREET # (if applicable)	

BANKING INFORMATION

BANK NAME		CONTACT NAME/ACCOUNT MANAGER		EMAIL ADDRESS	
ADDRESS		TELEPHONE NUMBER		* FAX NUMBER	
CITY	STATE	POSTAL CODE	COUNTRY		
TYPE OF BANKING ACCOUNT	ACCOUNT NUMBER				

BUSINESS REFERENCES (MUST HAVE 3 REFERENCES)

Add additional references by attaching another application sheet.

1. BUSINESS NAME		CONTACT NAME/ACCOUNT MANAGER		EMAIL ADDRESS	
ADDRESS		TELEPHONE NUMBER		* FAX NUMBER	
CITY	STATE	POSTAL CODE	COUNTRY		
2. BUSINESS NAME		CONTACT NAME /ACCOUNT MANAGER		EMAIL ADDRESS	
ADDRESS		TELEPHONE NUMBER		* FAX NUMBER	
CITY	STATE	POSTAL CODE	COUNTRY		
3. BUSINESS NAME		CONTACT NAME/ACCOUNT MANAGER		EMAIL ADDRESS	
ADDRESS		TELEPHONE NUMBER		* FAX NUMBER	
CITY	STATE	POSTAL CODE	COUNTRY		

The above information is being submitted for the purpose of allowing Harrison Gypsum, LLC to assess and/or continue to assess credit solely for the business purposes of the applicant. The applicant hereby represents and warrants that the information contained herein, or submitted in connection herewith, is true and complete as of the date hereof. The applicant hereby authorizes Harrison Gypsum, LLC to contact and investigate the references, including the banks listed above and hereby authorizes the references to release the requested information. The applicant hereby agrees to remit payment within the terms specified on the face of each invoice. If payment is not received when due, the applicant also agrees to pay a monthly service charge equal to one and one half percent (1 1/2%) or the maximum amount allowable under applicable state law, of the unpaid delinquent balance until the account is paid in full. If the account is placed for collection, the applicant agrees to pay all costs and expenses of collection, including reasonable attorney's fees and expenses. In connection with any purchase of Harrison Gypsum, LLC products by Customer, Customer agrees to be bound by and comply with the then current Harrison Gypsum, LLC terms and conditions of sale applicable to such products (as such terms and conditions appear on Harrison Gypsum, LLC invoices), unless otherwise agreed in writing by Harrison Gypsum, LLC. All contrary or additional terms included with customer's purchase order or otherwise by Customer are excluded. The Federal Equal Credit Opportunity Act 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) or 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. One federal agency that administers compliance with this law is the Federal Trade Commission. Arcosa Specialty Materials Terms and Conditions apply to all orders. For the latest version, please refer to our website at <https://www.ArcosaSpecialtyMaterials.com/sales-terms-conditions/>. If you are unable to access the website, please contact Arcosa Specialty Materials Customer Service to have a copy sent to you.

CUSTOMER SIGNATURE	DATE	AUTHORIZED OFFICER SIGNATURE REQUIRED	TITLE
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