

# LEEPER'S STAIR PRODUCTS

Dear Prospective Leeper's Stair Products Customer,

We would like to take this opportunity to invite you to explore the Leeper's Stair Products "difference".

We thank you for interest in setting up an account with Leeper's Stair Products. We have created a very simple process for becoming one of our valued customers.

- Complete and return via fax the attached credit application.
- The credit approval process may take five to seven business days.
- If you would like to place an order before your account has been approved you may do so by using a credit card.
- Simply call our customer service department at (800) 775-1173 to process your first order by credit card.
- Leeper's Stair Products will only charge sales tax on orders shipped to the following states CA, CO, GA, IL, MN, and NV.

*(If you have a resale certificate for any of the states listed please include a copy with your returned credit application.)*

Explore the difference Leepers Stair Products can make with your business. Stay ahead of the **curve!**

Sincerely,

The Entire Leeper's Staff



When complete fax to 1-562-422-9924
Attn: John Gallogly
No Cover Sheet Necessary.

A. General Information:

Business Name Contact Name
Phone ( ) Fax ( )

Address
City State Zip

Email Web URL

Mailing Address (If Different)

Address
City State Zip

Please Attach Your Most Recent Balance Sheet

B. Type of Business:

Corporation Partnership Sole Proprietorship

Resale Information: State Number
(Please include a copy of your resale license with this application.)

Please check what type of business you are.

- Installer
General Contractor
Distributor / Retail
Other (Please Specify)

Number of Years in Business
How much do you currently purchase each month in stair parts?

C. Corporate Officers, Partners or Proprietor

Please skip sections C thru E and simply sign page 2 if you will only be making credit card purchases.

Name Title
Address
City State Zip

Name Title
Address
City State Zip

Name Title
Address
City State Zip

Accounts Payable Contact

**D. Bank Reference:**

Bank Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone (     ) \_\_\_\_\_ Contact Person \_\_\_\_\_  
Checking Account Number \_\_\_\_\_  
Loan Account Number \_\_\_\_\_

**E. Trade References:**

Business Name \_\_\_\_\_  
Current Credit Limit \$ \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone (     ) \_\_\_\_\_ Fax (     ) \_\_\_\_\_

Business Name \_\_\_\_\_  
Current Credit Limit \$ \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone (     ) \_\_\_\_\_ Fax (     ) \_\_\_\_\_

Business Name \_\_\_\_\_  
Current Credit Limit \$ \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone (     ) \_\_\_\_\_ Fax (     ) \_\_\_\_\_

**Amount of Credit Requested:** \$ \_\_\_\_\_

I (we) hereby authorize Leeper's Stair Products to contact the above references for information regarding current balances and credit history as deemed necessary by Leeper's for purposes of allowing credit for (our) Company.

**The person signing below must be a Corporate Officer, Partner or Owner of the Company submitting this application.**

**Name** \_\_\_\_\_ **Title** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_