AETNA PLYWOOD, INC. Page 1 of 2							2	
1401 St. Charles Rd., Maywood, IL 60153								
(708) 343-1515 Fax: (708) 34	3-1101					credit@aetnaplywood.	com	
□ Maywood, IL □ Cicero, IL □ Indianapolis, IN □ Rockford,IL □ White Bear Lake, MN								
Legal Name of Business:				□ Proprie	etorship	□ Partnership		
	_			□ Corpor	ation	☐ Limited Liability Corp. LLC		
Years in Business	Number of Employees	Federal Identificatio	n Number (FEIN)	Taxable				
				Tax Exem	pt □ (tax	exempt certificate required)		
Have you previously done business with Aetna Plywood? 🗆 Yes 🗆 No 💮 If yes, account number or last purchase								
Bill To:								
Billing Address (street and numb		N	Main Phone:					
City/State/Zip				F	ax:			
Email Address for Invoices/Stater	nents: (Required)							
	,							
Ship To:								
Ship to Address: (if different from billing address)								
Nearby major intersecting streets	, highways or roads:							
Do you require purchase order #'s to appear on your invoices?			□ Yes □ No	Do you n	refer COD te	erms?   Yes   No		
Do you require order acknowledgements?			□ Yes □ No					
Contact Information:	,							
Contact Information.								
Buyers	Project Managers				Accounting			
Name:		Name:		N	Name:			
Email:	Email:			E	Email:			
hone: Phone:			Р	hone:				
Name: Name:								
nail: Email:								
Phone:	Phone:							
0 /0 / /0								
Owners/Partners/Corporate (	Officers:		Mahila	F!!-				
Name and Title:			Mobile:	Email:				
Name and Title:				Email:				

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To J. D. C. Commission					
Trade References:					
Laminate & Solid Surface	Granite & Quartz				
Name:	Name:				
Monthly Purchases:	Monthly Purchases:				
MDF , Melamine & Related	Hardware				
Name:	Name:				
Monthly Purchases:	Monthly Purchases:				
PERSONAL GUARANTY					
	tedness by the Applicant to Aetna Plywood, Inc., and waives presentment and demand for				
	onsents without notice of any extensions of time or increase in the amount of credit given. This				
	ncurred unless and until a written notice is served upon Aetna Plywood, Inc. by certified mail-				
	ses. Guarantor consents to allow Aetna Plywood Inc. to change or modify the terms of sale				
without notice to or authorization of the guarantor. Guarantor assumes all responsibilit	y for staying advised as to the Applicant's financial condition and risk.				
Guarantor's Signature as Individual:	Date:				
(not in thecapacity of corporate officer)  Print Name:	Title:				
AGREEMENT FOR A COMMERCIAL ACCOUNT					
	quests Aetna from time to time to extend credit to enable Applicant to buy merchandise from Aetna for business or commercial				
	ant, Applicant states as follows: 1. Applicant represents and warrants that all information including but not limited to the information on				
	e date of this application. Applicant agrees to provide Aetna with notice of changes to the information contained on the face and back				
	Jelivered on that invoice. ("Payment Due Date") 3. If any invoice remains unpaid after the Payment Due Date then Aetna has the on the last business day of the month in which Payment Due Date falls, Applicant shall pay to Aetna a late charge on all past due				
	nounts are paid in full. 5. The late charge shall be two percent per month, equaling an annual percentage rate of twenty-four percent.				
6. If Applicant pays any invoice with a check, and the check is returned from Applicant's bank unpaid for any reason, Applica	$nt  will pay a service charge of thirty-five dollars or one half of one percent of the face amount of the check, whichever, is greater. \ The approximately the dollars of the check of$				
service charge will be along with any late charges that may be applicable. 7. Applicant agrees that any merchandise to be returned, if approved by Aetna, Applicant will incur a restocking charge and further responsibility for shipping and handling charges. 8.					
This agreement shall be a continuing agreement and shall apply to each purchase of merchandise. Applicant agrees that Aetna can change or amend any of the terms on this Agreement. Applicant's continued use of commercial charge account after the					
effective date of the amendment or change shall be deemed acceptance of the changed terms. 9. Applicant may terminate this Agreement at will at any time by written notice to Aetna. Such termination to be effective following the receipt of the notice.  Termination of this Agreement shall result in all subsequent purchases being shipped on prepaid basis only. 10. Applicant agrees to hold harmless Aetna Plywood, Inc. for any damages resulting from the withholding and/or delaying of the shipment of					
merchandise to Applicant resulting from events outside the control of Aetna Plywood, Inc. 11. Applicant understands and agrees that Aetna's liability of damages as a result of failure of any product shall be limited to the cost of replacement of the goods					
supplied, and Aetna shall not be label for any incidental or consequential damages arising therefrom. 12. Applicant agrees to submit to the jurisdiction of the Circuit Court of Cook County, Illinois. 13. Applicant and Aetna hereby waive the right to a jury trial for					
any claim arising from the enforcement of this agreement. 14. Applicant will pay all expenses, including reasonable attorney to exercise any of its rights hereunder shall not be deemed a waiver of Aetna's rights under this agreement.	rs' fees, incurred by Aetna in the enforcement of this agreement and the collection of any charges due thereunder. 15. Aetna's failure				
the information concerning the status and conduct of the Applicant's business and personal credit. Applicant will be charged	tion from Applicant's trade, bank and personal references. Applicant authorizes the references contacted by Aetna to release to Aetna 2% credit card processing fee if a credit card is used to purchase material. Aetna does not accept American Express.				
	signed in order to further evaluate the credit worthiness of the undersigned as a principal, proprietor, partner and/or guarantor in horizes Aetna Plywood Inc. to utilize a consumer credit report on the undersigned from time to time in connection with the extension or				
continuation of the business credit represented by the credit application. The undersigned as an individual hereby knowingly					
Applicant's Signature:	Date:				
	Date:				
Print Name:	Title:				