

CREDIT ACCOUNT APPLICATION



By filling out this credit application you are applying for credit at all TCC Companies, including TCC Materials, Roberts Concrete Products, Akona Manufacturing, LLC and Amcon Concrete products, LLC.

A facsimile of this document may be used as an original.

Complete fully and have all owners or officers sign to prevent any delays in processing.

Return application to the address below:

Credit Manager
TCC Materials | Amcon Concrete Products, LLC
2025 Centre Pointe Boulevard, Suite 300
Mendota Heights, MN 55120-1221

Email: **credit@tccmaterials.com**

Phone: 651-688-9292 • 800-642-3887

Fax: 651-688-0124

CONFIDENTIAL

CREDIT ACCOUNT APPLICATION

Company Name/Purchaser: _____

Address: _____

City: _____ State: _____ Zip Code: _____

County: _____

Telephone: (____) _____ Facsimile: (____) _____

Mobile: (____) _____ E-mail: _____

Purchase Order Required: Yes No

Business Type: Corporation _____ Partnership _____

Proprietorship (individual)

Classification of Company: (check appropriate box) Residential (1) Poured Walls (2)

Concrete Masonry (3) General Contractor (4) Curb & Gutter (5) Highway (6)

Utilities (7) Agricultural (8) Municipal/Government/Private (9) Homeowner (10)

Date Started or Incorporated: _____ State of Registration or Incorporation: _____

Federal ID No.: _____ Sales Tax Exempt Yes No

(Required)

If yes, provide a copy of the Sales Tax Exempt Forms

The company has a total number of _____ corporate officers, shareholders, partners or owners.

For each such person, please provide the information requested below.

Owner/Officer Social Security Number Title

1. _____

Residential Address: _____

Owner/Officer Social Security Number Title

2. _____

Residential Address: _____

Owner/Officer Social Security Number Title

3. _____

Residential Address: _____

Bank Reference City Account Number

A. _____ # _____

Credit References City/State Telephone Number Fax Number

1. _____ () _____ ()

2. _____ () _____ ()

3. _____ () _____ ()

Credit Line Requested: \$ _____

Office Only

Date Reviewed: _____ Credit Limit Authorized: \$ _____

Application Reviewed By: _____ Application Authorized By: _____



NEW & UPDATED ACCOUNT INFORMATION

Please fill out below information for all new accounts or account updates & submit along with your credit application. Thank you.

Company: _____ Date: _____
 Contact: _____ Phone: _____
 Address: _____ Mobile: _____
 City: _____ State: _____ Zip: _____
 Email: _____ Website: _____

If you've already been in contact with a sales rep, please list here: _____

Customer type (**choose one only**) . If you're a dealer or distributor who is tax exempt, please include your tax exempt certificate with this form and the application to prevent delay in tax exemption:

- Dealer (Generally buys in full pallet quantities and sells to contractors and/or end users)
 Contractor (Installer or end user of products) Other _____ (Please specify)

While purchases may be made from any of the below plants, please **choose one** as your main plant:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> Fargo, ND | <input type="checkbox"/> Harrisburg, SD | <input type="checkbox"/> Medford, MN (Bagging) | <input type="checkbox"/> Medford, MN (Block) |
| <input type="checkbox"/> Muscatine, IA | <input type="checkbox"/> Omaha, NE | <input type="checkbox"/> Rapid City, SD (Bagging) | <input type="checkbox"/> Rapid City, SD (Block) |
| <input type="checkbox"/> Roberts, WI | <input type="checkbox"/> Rosemount, MN (Akona) | <input type="checkbox"/> Sioux Falls, SD (Bagging) | <input type="checkbox"/> St. Cloud, MN |
| <input type="checkbox"/> St. Joseph, MN | <input type="checkbox"/> St. Paul, MN | <input type="checkbox"/> Vinton, IA | <input type="checkbox"/> Worthington, MN |

Please choose the brands / products you intend on purchasing (**choose all that apply**):

- | | | |
|--|---|---|
| <input type="checkbox"/> Akona | <input type="checkbox"/> Architectural & Commercial CMU | <input type="checkbox"/> Basement / Foundation Gray Block |
| <input type="checkbox"/> Cherry Stone | <input type="checkbox"/> Novabrik | <input type="checkbox"/> Nurserymen's Preferred (Landscape) |
| <input type="checkbox"/> Portland Cement | <input type="checkbox"/> Precast | <input type="checkbox"/> ProSpec / C-Cure |
| <input type="checkbox"/> Quikrete | <input type="checkbox"/> Retaining Wall Block & Pavers | <input type="checkbox"/> Sakrete |
| <input type="checkbox"/> Spec Mix | <input type="checkbox"/> TCC | <input type="checkbox"/> Tech-Mix |
| | <input type="checkbox"/> Other _____ | (Please specify) |

If you would like to receive monthly statements via e-mail, please check box on left.

If you would like to receive electronic invoices, please check box on left.

Statement and/or Invoice E-mail Address (**list one address**): _____

If you would like to receive an e-mail with an order acknowledgement after an order is entered into our system, please check box and list the email address to receive order acknowledgements here:

Order Acknowledgement E-mail Address (**list one address**): _____

I am a dealer or distributor and would like to be listed on the "Where to Buy" locator of our website (select products only). My physical address for mapping (if different than above address) is:

Physical Address: _____

I would like to be kept updated with new products and technologies from TCC/Amcon. Please add the following e-mail address(es) (if different or in addition to above address) to our mailing list:

E-mail Address(es) for Updates: _____

Internal Use Only:

Account: _____

Sales: _____

Type: _____

Plant: _____