

## **Squires Lumber**

Date:

## Colton & Suisun City, California

<b>Business contact info</b>	rmation		
Contact name:			
Phone:	Fax:	E-mail:	
Address:			
City:		State:	Postcode:
In business since:			
Sole trader:	Partnership:	Limited liability: $\square$	Other:
Business and credit in	nformation		
Postal address:			
City:		State:	Postcode:
Telephone:	Fax:	E-mail:	
Bank name:			
Bank address:		Phone:	
City:		State	Postcode:
Business/trade refere	nces		
Company name:		Company name:	
Contact name:		Contact name:	
Address:		Address:	
City:	Postcode:	City:	Postcode:
Phone:		Phone:	
Fax:		Fax:	
E-mail:		E-mail:	
Company name:		Company name:	
Contact name:		Contact name:	
Address:		Address:	
City:	Postcode:	City:	Postcode:
Phone:		Phone:	
Fax:		Fax:	
E-mail:		E-mail:	
Agreement			
•	n invoices must be made	within seven working days o	•
	ication, you authorise <b>P</b> errade references that you	plar Tool & Supply to make u have supplied.	inquiries into the
Personal Guarantee Signature			
Title:		Title:	

Date: