

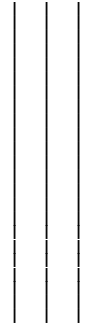
- Dolan & Traynor Inc. is a family owned business
- The Company was founded on a handshake - and that relationship continues today with 2nd generation management
- We proudly represent over 40 leading product lines
- We stock many of our products so they are ready to be delivered to you within 24 hours
- We have a 30-year history with the DuPont Company
- Our Customer Service team is knowledgeable in all product areas and is available to serve you Monday through Friday, 8AM to 5PM.
- For optimum efficiency, our one central location houses both our offices and our warehouse
- We stock and deliver promptly through our fleet of 12 trucks
- We are proud of our 50-year association with the Jay R. Smith Mfg. Co.
- For your convenience, we offer assembly of various plumbing products
- We are proud of our record of exceptional service
- Our product showroom is open Monday through Friday from 8AM to 5PM.

How can we serve you?



Cards

CONFIDENTIAL



DOLAN & TRAYNOR INC.
 ATTENTION: GARY MASTRACCHE
 32 RIVERVIEW DRIVE
 P.O. BOX 487
 WAYNE, NJ 07474-0487

PLACE
 STAMP
 HERE

dolan & traynor_{INC}
 Marketing Distributor™ of Quality Building Specialties

Credit Application



Disclosure Statement

All information will be held in the strictest confidence and solely for our use in evaluating your credit needs. You will be advised of our decision as soon as possible.

32 Riverview Drive • P.O. Box 487
 Wayne, NJ 07474-0487

Tel: 973-696-8700 x136
 800-696-8760
 Fax: 973-696-8282
 Attn: Gary Mastracche

INSTRUCTIONS AND DOCUMENTATION TO ATTACH:

- ✓ Complete all sections
- ✓ Application must be signed by a principal of your company
- ✓ Include copy of recent financial statement
- ✓ Attach a copy of a voided check
- ✓ Resale Tax Exempt Certificate (if applicable)

PLEASE TELL US ABOUT YOUR FIRM (Please print)

Legal Name of Business:			DBA:		
Street:		City:		State:	Zip:
Phone:		Fax:	E-mail:		
Please circle one:		Corporation	Proprietorship	Partnership	
Principal Name and Title:	1.			SS#:	
Principal Name and Title:	2.			SS#:	
Type of Business:			Dun and Bradstreet Rating:		
Years in Business:		No. Of Employees:			
Federal Tax ID#:		Resale Tax Exempt Certificate#:			
Estimated Annual Sales:		Estimated Monthly Dolan & Traynor Purchases:			

PLEASE PROVIDE YOUR BANKING INFORMATION (Please print)

Bank Name:		Account#:			
Street:		City:		State:	Zip:
Contact Person:		Phone:		Fax:	

PLEASE PROVIDE YOUR TRADE REFERENCES (Three required)

Company Name:		Fax#:	
Contact:		State:	
City:			
Company Name:		Fax#:	
Contact:		State:	
City:			
Company Name:		Fax#:	
Contact:		State:	
City:			

I hereby authorize Dolan & Traynor Inc. to contact any of the companies listed on this application to obtain information regarding my credit.

Signature _____ Title: _____

Printed Name _____

Date of Information: _____ * Please return Signed Original by Mail for Our Files

Terms and Conditions of Credit

Dolan & Traynor Inc. credit terms are Net 30. Continued late payments will result in a change of terms to COD only. A 1% service/interest charge will be made on past due invoices. If this account is placed in the hands of a collection agency or attorney for collection, the undersigned will be charged 25% of the unpaid principal as a collection fee. A \$50 fee will be charged for all returned checks.

I agree to the above terms and conditions of sale:

Signature of Principal Date

Printed Name of Principal

This is to certify that I am a principal in the company applying for credit with Dolan & Traynor Inc., and in consideration for the extension of credit, I do personally guarantee payment of any and all invoices that remain unpaid.

Signature of Principal Date

Printed Name of Principal

Amount of Desired Credit

Account Payable Contact

Phone#