

**TEXAS LEHIGH CEMENT COMPANY LP**  
**P.O. Box 610**  
**Buda, Texas 78610**  
**(512) 295-6111 Fax (512) 295-3102**

DATE: \_\_\_\_\_

CUSTOMER: \_\_\_\_\_ BUSINESS PHONE: \_\_\_\_\_ FAX #: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ LENGTH OF TIME IN BUSINESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_ TYPE OF BUSINESS: \_\_\_\_\_  
 (If different) \_\_\_\_\_

CORPORATION:  PARTNERSHIP:  PROPRIETORSHIP:   
 (please check appropriate box)

AFFILIATED BUSINESS(ES): \_\_\_\_\_ CREDIT AMOUNT REQUESTED: \_\_\_\_\_

PRINCIPALS OR OFFICERS: _____ _____ _____	TITLE: _____ _____ _____
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TRADE REFERENCES	PHONE NUMBER	FAX NUMBER / EMAIL ADDRESS
_____	_____	_____
_____	_____	_____
_____	_____	_____

BANK	ACCOUNT NUMBER	PHONE NUMBER
_____	_____	_____

FOR AND IN CONSIDERATION of the extension of credit for the purchase of materials hereby requested for the above named company, partnership, proprietorship or corporation, (herein designated as Customer), the undersigned Customer as well as the undersigned individual Guarantor or Guarantors, do hereby agree and covenant to pay to Texas Lehigh Cement Company (herein designated as Texas Lehigh), and/or its subsidiaries any and all debts, obligations or sums of money that may become due and owing to Texas Lehigh by the herein named Customer, by virtue of any and all extensions of credit made or to be made in the future by Texas Lehigh. The undersigned Customer, Guarantor or Guarantors hereby agree to pay Texas Lehigh at its office in Buda, Hays County, Texas any and all debts, obligations or sums, including court costs, attorney fees, or collection fees that may be incurred by Texas Lehigh in collecting any sums due on customer's account.

Customer and Guarantor agree that the terms of sale on all materials purchased from Texas Lehigh are net account due by the tenth (10<sup>th</sup>) of the month following the month of sale, less any discounts allowed by Texas Lehigh at the time of the sale. Full payment must be received before the last day of the month following the month of the sale.

CUSTOMER  BY: _____ Officer or Owner	GUARANTOR  _____ Individually  ADDRESS: _____ _____ PHONE #: _____ _____
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**OFFICE USE ONLY**

DATE APPLICATION RECEIVED: \_\_\_\_\_ CONTACTED BY: \_\_\_\_\_  
Sales Representative or other Texas Lehigh Cement Company Personnel

DATE ACCOUNT OPENED: \_\_\_\_\_

REMARKS: \_\_\_\_\_  
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