

COD APPLICATION

Today's Date (MM/DD/YYYY)

CONSTRUCTION SUPPLY

To better serve your account and ensure accurate processing of orders, we ask that you complete the forms below and return them along with your COD application. Any future updates to your account information can be sent to: ar@silvercsusa.com

ENTITY INFORMATION:					
Business Name:					
Address:		City/	City/State/Zip:		
		Cell:			
Email:	Phone: Fax #:		x #:		
Business Entity is a: Corporation LLC: Partnership Sole Proprietor	Contractor License No. Year Issued: tate: RMO RME				
		erchandise on a tax exen card as per state regula	npt basis we must have a Itions.		
Employees Authorize	d to Sign On Your Ac	count (Authorized F	Purchasers)		
Name	Position/Title	Phone	Email		
1.					
2.					
3.					
4.					
5.					

ACCOUNT AGREEMENT - COD ACCOUNT

PLEASE READ CAREFULLY AND MAKE A COPY FOR YOUR RECORDS

By signing below, the undersigned applicant ("Customer") agrees to the following terms and conditions governing all purchases from Silver Construction Supply, L.L.C. ("SCS") under a Cash on Delivery (COD) account:

Payment Terms: All purchases made under this account are due in full at the time of sale or upon delivery. No credit terms are extended.

Accountable payment methods include again about gradit again or electronic funds transfer.

Acceptable payment methods include cash, check, credit card, or electronic funds transfer.

A credit card surcharge may apply, based on rates charged to SCS by its financial institutions. These rates are reviewed periodically. Please contact the SCS Credit Department for the current surcharge.

SCS reserves the right to suspend or withhold deliveries if payment is not received at the time of delivery or pickup.

Return & Restocking Policy: Returns are accepted only with prior authorization and must meet the following conditions:

- A. Custom or special-order items are non-returnable.
- B. Returned items must be in new, resalable condition and are subject to inspection.
- C. A minimum 15% restocking fee applies. Additional charges may apply for repackaging, retesting, or return freight.
- D. All returns must be authorized in advance by SCS management.

Acknowledgement: By signing below, the Customer certifies that all information provided in this application is accurate and consents to SCS obtaining credit or reference information as needed. The Customer agrees to the terms outlined above for all purchases made under this account.

Last Name:	First Name:
Position/Title:	
Signature:	Today's Date (MM/DD/YYYY):