

	Plant _____ County _____		<b>CONFIDENTIAL CREDIT APPLICATION</b>		Fax to: 641-394-2402 Email to: credit@croell.com	
	Legal Name _____		Phone # _____		Cell Phone # _____	
Trade Name (If applicable) _____					Fax # _____	
Business Physical Address _____		City _____	State _____	Zip _____	County _____	
Business Mailing Address (If different) _____		City _____	State _____	Zip _____	County _____	
Type of Business _____		State of Registration _____	No. of Employees _____		Years in Business _____	Tax ID # _____
Check One <input type="checkbox"/> Proprietorship <input type="checkbox"/> Corporation <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> LLC <input type="checkbox"/> State or Local Government						
Accounts Payable Contact: _____		AP Email _____		Electronic Billing YES      NO		
<b>Previous Business(es)</b>	Name(s) _____		Location(s) _____			
<b>Principals</b> <small>(Owners, partners and principal officers)</small>	Name _____	Title _____	Social Security No. _____	Home Address _____		Home Phone No. _____
	Name _____	Title _____	Social Security No. _____	Home Address _____		Home Phone No. _____
	Name _____	Title _____	Social Security No. _____	Home Address _____		Home Phone No. _____
<b>Credit References</b>						
Company Name _____		City and State _____		Phone # _____		Email / Fax # (Required) _____
<b>Bank References</b>						
Account Type	Account #	Bank Name	Branch		Email / Fax #	Contact Person
Checking						
Loan						
Line of Credit						
<b>Terms and Conditions (Required)</b>						
<p>THE UNDERSIGNED ATTESTS FINANCIAL RESPONSIBILITY, ABILITY AND WILLINGNESS TO PAY FOR INVOICES IN ACCORDANCE WITH THE FOLLOWING TERMS: The undersigned certifies that he/she has the authority to submit this application on behalf of the applicant, and further certifies that the above information is true and complete and is given for the purpose of obtaining credit with Croell, Inc. Croell, Inc. may verify this information, as well as provide information related to this or related accounts to others seeking such information. <b>THE UNDERSIGNED WHO IS EITHER A PRINCIPAL OR A SOLE PROPRIETOR OF THE CREDIT APPLICANT, HEREBY CONSENTS TO AND AUTHORIZES THE USE OF A CONSUMER CREDIT REPORT ON THE UNDERSIGNED BY CROELL, INC., FROM TIME TO TIME AS MAY BE NEEDED, IN THE CREDIT EVALUATION PROCESS.</b> The undersigned hereby authorizes any credit or bank references listed above, or any credit bureau, to disclose any credit information requested. All charges are due and payable Net 30 Days from invoice date. 1 1/2 % per month (18% per annum) finance charge will be added to past due accounts. Past due accounts are subject to withdrawal of charge account privileges. Customers shall pay all costs of collection of sums due including the principle sum, interest thereon, attorneys' fees and cost of suit.</p>						
X _____		_____		_____		_____
Signature		Title		Printed Name		Date
X _____		_____		_____		_____
Signature		Title		Printed Name		Date
<b>Personal Guaranty (Required)</b>						
<p>The undersigned each unconditionally guarantees full payment of all present and future indebtedness to Croell, Inc. This guarantee is open and continuous and is given to induce Croell, Inc. to sell or continue to sell product and/or services, and shall remain effective until revoked by the undersigned by notice in writing delivered by certified or registered mail to Croell, Inc. Each guarantor waives presentment, demand, protest, and notice of any kind. If there is more than one guarantor, their obligations are joint and several and action may be brought against any guarantor without first proceeding against applicant, or any other person or security and without pursuing any other remedy. In any proceeding to interpret or enforce this guarantee, Croell, Inc. shall be entitled to recover costs, including attorney fees. <b>THE UNDERSIGNED PERSONAL GUARANTOR, HEREBY CONSENTS TO AND AUTHORIZES THE USE OF A CONSUMER CREDIT REPORT ON THE UNDERSIGNED, BY CROELL, INC., FROM TIME TO TIME AS MAY BE NEEDED, IN THE CREDIT EVALUATION PROCESS.</b></p>						
X _____		_____		X _____		_____
Signature		Date		Signature		Date
Office Use Only - Approved by _____			Declined by _____		New _____ Updated _____	
Viewpoint Acct # _____		Scanned _____		Letter Sent _____		



2010 Kenwood Avenue  
P.O. Box 430  
New Hampton, IA 50659  
Phone: 641-394-6789  
Toll-Free: 1-800-765-1490  
Fax: 641-394-3735

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## Concrete Terms & Conditions

### **INJURY WARNING:**

**INJURIOUS TO EYES, CAUSES SKIN IRRITATION, and CONTAINS PORTLAND CEMENT:** Contact with wet (unhardened) concrete, mortar, cement, or cement mixtures can cause skin irritation, severe chemical burns, or serious eye damage. Avoid contact with eyes and skin. Wear waterproof gloves, a fully buttoned long-sleeved shirt, full-length trousers, and light fitting eye protection when working with these materials. If you must stand in wet concrete, use waterproof boots that at the top are high enough to keep concrete from flowing into them. If you are finishing concrete, wear knee pads to protect knees. Wash wet concrete, mortar, cement, or cement mixtures from your skin with fresh clean water immediately after contact. Indirect contact through clothing can be as serious as direct contact, so promptly rinse out wet concrete, mortar, cement, or cement mixtures from clothing. Seek immediate medical attention if you have persistent or severe discomfort. In case of eye contact, flush with plenty of water for at least 15 minutes. Consult a physician immediately. **KEEP OUT OF REACH OF CHILDREN.**

**PURCHASER AGREES TO CONVEY THIS WARNING TO ALL PERSONS WHO MAY USE OR COME INTO CONTACT WITH WET (UNHARDENED) CONCRETE, MORTAR, CEMENT, OR CEMENT MIXTURES.**

### **AGREEMENT**

- If any materials fail to conform to the description on the face of the ticket, Seller may at its option replace materials or refund purchase price therefor or issue credit therefor, but shall have no further liability.
- When concrete is required to meet a specific comprehensive strength or when quality or character of the material is to be determined, the concrete shall be tested only from samples taken at seller's plant or from truck at time of delivery and subject to current ASTM tests and ACI requirements (ASTM C31, C39, ACI 318) in the presence of a representative of Croell. Concrete sold on the strength basis shall be based on standard specification for ready mix concrete (ASTM C94).
- Seller shall not be responsible for the effect on the concrete of any admixture requested by the purchaser before or after delivery. Seller, having no control over the finishing of the delivered concrete product, is not responsible for damage to any concrete structure or slab resulting from a deterioration in the finished product. Deterioration includes scaling, cracking, popping or crumbling of the finished concrete product. Finishing of the concrete product includes, but is not limited to, poor subgrade conditions, improper curing methods, excess water added on the job (at the instructions of the Purchaser), and excessive troweling applied by the Purchaser or his agents. Seller is not responsible for damage to concrete caused by deposits of de-icing agents, such as salt, upon the surface of the concrete.
- The size and weight of the delivery truck may possibly cause damage to the premises and/or adjacent property by placement of the material in the load where Purchaser desires it. Purchaser RELEASES the driver of the delivery truck and his supplier, relieving them from any responsibility from any damage that may occur to the premises and/or adjacent property, buildings, sidewalks, driveways, curbs, etc., by the delivery of this material and that Purchaser agrees to help him/her remove mud from the wheels of his/hers vehicle so that he will not litter the public street. Further, as additional consideration, the undersigned agrees to indemnify and hold harmless the driver of the truck and supplier for any and all damage to the premises and/or adjacent property which may be claimed by anyone to have arisen out of delivery of this order.
- 1½ % per month (18% per annum) finance charge will be added to past due accounts.

Returned checks will incur a \$30 service charge and Purchaser will be required to make payment in full by certified check.

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**Fast. Friendly. Fair. Finest Quality**



P.O. Box 430 | 2010 Kenwood Ave | New Hampton, IA 50659

641.229.8100 

arportal@croell.com 



Greetings,

We are excited to introduce **Versapay**, our new online customer portal!

With our customer portal, you will experience many benefits such as:

- Email notifications for new invoices with PDF attached.
- One-click access to invoices and supporting documents.
- Ability to pay invoices online in a safe and secure environment.
  - Setup your bank account and/or credit card.
  - Setup autopay and schedule payments.
- Online communications for any questions or concerns on invoices.
- 24/7 access to your account activity and history.
- Email notifications for statements with PDF attached – COMING SOON!

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**\*\*\* Emailed Invoices Only \*\*\***

If you do not wish to “utilize” the portal, we can still send an invitation to your email which will automatically enroll you in emailed invoices – no more waiting on the mail for your invoices!

You can also utilize “Quick Pay” right from the emailed invoices without logging into the portal.

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To take advantage of emailed invoices or the customer portal, please ensure to provide the following on your credit application:

- Main email address to receive invoices and statements.
- Main Accounts Payable contact for your company.

*Thank you – WE look forward to serving you!*