



### Requirements for a credit account

**Processing Time – (5 to 7) business days upon receipt of (3) supplier references**

Greetings,

An **ARCOSA AGGREGATES** Company has received a credit request from your company. To avoid future delays when placing an order, please find the following documents that are needed to process your request:

- Credit Application – authorized signature required
- Guaranty
- Bank Reference Inquiry

Please complete the *Credit Application* form and forward to the Arcosa Aggregates Credit Department for processing at the email provided at the top of the *Credit Application*. You may send a prepared trade reference sheet so long as it provides all the requested information listed in the *Credit Application*.

Please complete the top portion and sign the *Bank Reference Inquiry* form and forward **to your bank**. The bank will need to complete the form and email/fax it back to the Arcosa Aggregates Credit Department.

#### **PLEASE NOTE:**

- **ARCOSA AGGREGATES** requires a **SIGNED** Credit Application to process application.
- Trade/credit references provided need to be major suppliers.
- Job Information and applicable tax certificates are requested *prior* to all shipments.
- All credit application documents need to be forwarded to the Arcosa Aggregates Credit Department.
  - Email: [Aggcreditapp@arcosa.com](mailto:Aggcreditapp@arcosa.com)
  - Fax: (817) 549-5317

The credit information we obtain will only be used to evaluate the credit worthiness of the business and will be kept confidential.

We greatly appreciate the opportunity of earning your business and look forward to serving you in the future. Should you have any further questions or concerns, please do not hesitate to contact us.



### Arcosa Aggregates

### CREDIT APPLICATION

1112 E Copeland Rd., Ste 500, Arlington, TX 76011

PLEASE TYPE OR PRINT LEGIBLY:  
Incomplete applications will delay processing

EMAIL FORM TO:  
[Aggcreditapp@arcosa.com](mailto:Aggcreditapp@arcosa.com)

T: (469) 304-4315

F: (817) 549-5317

Would you like to receive your invoice by: Email  Mail  Taxable  Tax Exempt

CUSTOMER BUSINESS INFORMATION <i>(Complete all fields.)</i>					
LEGAL BUSINESS NAME			PARENT/AFFILIATED COMPANIES (IF APPLICABLE)		
STREET ADDRESS:			STREET ADDRESS:		
CITY:	STATE:	ZIP:	CITY:	STATE:	ZIP:
PHONE No.:	FAX No.:		PHONE No.:	FAX No.:	
FEDERAL TAX I.D. # <i>(NOTE: IF APPLICABLE, COPY OF RESELLER OR TAX EXEMPTION CERTIFICATE REQUIRED.)</i>			MONTHLY CREDIT REQUESTED \$ <i>(DO NOT LEAVE BLANK):</i>	PLANT LOCATION OR SALES REP TO PROVIDE MATERIALS:	
TYPE OF BUSINESS: CORP. <input type="checkbox"/>   PARTNERSHIP <input type="checkbox"/>   PROPRIETORSHIP <input type="checkbox"/>   INDIVIDUAL <input type="checkbox"/>   LLC <input type="checkbox"/>   GOVERNMENT ENTITY <input type="checkbox"/>					
YEARS IN BUSINESS:	YEAR OF INCORPORATION:	STATE OF INCORPORATION:	ARE PURCHASE ORDERS REQUIRED: YES <input type="checkbox"/> NO <input type="checkbox"/>		
ACCOUNTS PAYABLE CONTACT NAME:		PHONE No.:	EMAIL		
INVOICE EMAIL:			STATEMENTS EMAIL:		

NAME OF OWNERS, PARTNERS, OR OFFICERS AND TITLES IF INCORPORATED <i>(Complete all fields and provide at least one owner, partner or officer.)</i>	
NAME:	NAME:
TITLE:	TITLE:
ADDRESS:	ADDRESS:
PHONE No.:	PHONE No.:
EMAIL:	EMAIL:
SOCIAL SECURITY No.:	SOCIAL SECURITY No.:

TRADE REFERENCE INFORMATION <i>(Complete all fields and provide at least three references.)</i>			
1. COMPANY NAME:		STREET ADDRESS:	
CONTACT NAME:	CITY:	STATE:	ZIP:
EMAIL:	PHONE No.:		
2. COMPANY NAME:		STREET ADDRESS:	

CONTACT NAME:	CITY:	STATE:	ZIP:
EMAIL:	PHONE NO:		
3. COMPANY NAME:	STREET ADDRESS:		
CONTACT NAME:	CITY:	STATE:	ZIP:
EMAIL:	PHONE NO:		
4. COMPANY NAME:	STREET ADDRESS:		
CONTACT NAME:	CITY:	STATE:	ZIP:
EMAIL:	PHONE NO:		

<b>BANK INFORMATION</b> <i>(Complete all fields and provide a completed Bank Reference Inquiry form.)</i>			
BANK NAME:	BANK OFFICER NAME:		
ADDRESS:	CITY:	STATE:	ZIP:
ACCOUNT No.:	TYPE OF ACCOUNT:		
PHONE NO:	EMAIL:		

**APPLICATION TERMS.** The Customer identified above (“Customer”) hereby applies for open account credit terms from the Arcosa Aggregates entities as defined below<sup>1</sup> (each as the case may be, the “Seller” and, collectively, the “Sellers”). The Customer understands and agrees that all of the Sellers are entitled to rely upon this Credit Application and any financial statements or other financial information requested by any Seller from time to time, and provided by or on behalf of the Customer, in determining whether to extend or to continue open account credit accommodations to the Customer. Sellers may, at any time and from time to time, modify the limits of open account credit accommodations available to the Customer and the terms and conditions upon which open account credit accommodations will be extended to the Customer. Sellers are hereby authorized at any time and from time to time to generate or to obtain one or more credit or investigative reports from credit reporting agencies, and to investigate any reference listed herein pertaining to Customer’s credit and financial responsibility, its principals and officers and any Guarantor of the Customer’s obligations. All obligations incurred by the Customer to any of the Sellers are performable in Dallas County, Texas. The Customer hereby represents that all goods purchased from the Sellers are for business or commercial purposes and are not intended for personal, family, or household uses. By signing this application, the undersigned certifies that the information contained herein is complete and accurate and agrees to be bound by the Arcosa Aggregates Terms and Conditions of Sale located at <https://arcosaaggregates.com/terms>.

CUSTOMER NAME: \_\_\_\_\_

CUSTOMER SIGNATURE: \_\_\_\_\_

Print Name and Title: \_\_\_\_\_

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

<sup>1</sup> Arcosa Aggregates Texas, LLC; River Aggregates, LLC; HG Eagle, LLC; The Gravel Company, LLC; StonePoint Materials, LLC; Laurel Aggregate of PA, LLC; Laurel Aggregates of Delaware, LLC; Laurel Aggregates Terminal Services of Delaware, LLC; Lake Lynn Transportation, LLC; Utica Resources, LLC; Winn Marine, LLC; Winn Materials, LLC; Winn Materials of Kentucky, LLC; Arcosa Aggregates Gulf Coast, LLC; North Florida Rock, LLC; Opelika Stone Company, LLC; CreekWood Resources, LLC; Arcosa Aggregates West, LLC; Midwest Land Trust, LLC; Southwest Rock Products, LLC; White Mountain Rock Products, LLC; East SM, LLC; Stavola Quarries, L.L.C.; Stavola Summit Land PA, LLC; Beaver Run Farms, LLC; Stavola Construction Materials, LLC; Stavola Beaver Run Quarry, LLC; Stavola Sand & Gravel, LLC; Stavola Contracting Company, LLC; Stavola Asphalt Company, LLC; Summit Anthracite, LLC; Stavola Flemington Asphalt LLC; Stavola Flemington Land LLC; Stavola Industries, L.L.C.; Stavola Oldbridge Materials, L.L.C.; Stavola Newark Terminal LLC; Stavola Silverbrook Land LLC.

**GUARANTY**

In consideration for any Seller extending credit to Customer for any materials and/or services, the undersigned, in his or her capacity as an officer of Customer (herein referred to as the "Guarantor(s)"), hereby, jointly and severally, guarantee(s) the prompt payment of all sums now or hereafter owed and performance of all obligations of Customer to any Seller as if the Guarantor(s) was the primary obligor.

Guarantor(s) acknowledge(s) that this guaranty is an absolute, unconditional and continuing guaranty, and no notice of the indebtedness currently outstanding or hereafter uncured need be given to Guarantor(s). Materials and/or services may be sold and credit extended to Customer without notice to Guarantor(s) who hereby waives presentment, demand, protest, default, notice of default and evidence of indebtedness. Guarantor(s) hereby agree(s) that the terms of payment of any obligation of Customer to any Seller may be modified, rearranged, extended or renewed without notice to, or consent by, Guarantor(s). Guarantor(s) may terminate future obligations of Customer by written notice actually received by the President or any Vice President of the applicable Seller; provided, however, that no such notice shall be effective until thirty (30) days after such receipt or to any obligation uncured prior to the conclusion of such thirty-day period.

**Guarantor(s) irrevocably waive(s) any right to trial by jury in any action or proceeding concerning the Credit Application, this Guaranty, Customer's account or indebtedness, invoices and the commercial relationship between any Seller and Customer and/or Guarantor(s). Customer and Guarantor(s) agree to submit to personal jurisdiction and venue in a court of competent jurisdiction in Dallas County, Texas for all disputes or controversies concerning the Credit Application, this Guaranty, Customer's account and indebtedness, invoices and the commercial relationship between any Seller and Customer and/or Guarantor(s).**

Guarantor(s) irrevocably waive(s) and agree(s) to not assert any claim (as defined in 11 U.S.C. §101) that Guarantor(s) may now or hereafter have against any Seller because of payments or transfers made by Guarantor(s) or payments or transfers for which Guarantor(s) are obligated to make to any Seller hereunder.

Guarantor(s) hereby consent(s) to Seller's obtaining a Consumer Credit Report on Guarantor(s) for the purpose of evaluating the credit worthiness of Guarantor(s) in connection with an application for business credit.

GUARANTOR NAME: \_\_\_\_\_

[ GUARANTOR NAME: \_\_\_\_\_

Signature: \_\_\_\_\_  
Name: \_\_\_\_\_  
Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Name: \_\_\_\_\_  
Title: \_\_\_\_\_

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

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

[ If Guarantor is an individual, add the following:

If Guarantor is an individual, add the following:

DL#: \_\_\_\_\_ State: \_\_\_\_\_

DL#: \_\_\_\_\_ State: \_\_\_\_\_

Social Security No.: \_\_\_\_\_ ]

Social Security No.: \_\_\_\_\_ ]



**BANK REFERENCE INQUIRY**

**Customer Information:**

Business Name:		
Address:		
City:	State:	Zip Code:
Name on Account:	Account Number:	

*I understand the above information is given for the purpose of obtaining credit from an Arcosa Aggregates Company. I hereby authorize the financial institution to release this information of financial responsibility for the above-named business and/or person. A fax copy of this document will be deemed as original.*

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 (Signer must be on the account.) Print Name

**\*\*Please forward this Bank Reference Inquiry, with signature, directly to your bank.\*\***

**Bank Information:**

*All information below **must be completed by the financial institution** and will only be used for the purpose of establishing credit with ARCOSA AGGREGATES. All information provided is confidential.*

Account Number:	Loans with bank? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Date Account Opened:	Amount Outstanding:	
Average Balance:	Secured by:	Unsecured:
Returned Checks: Yes <input type="checkbox"/> No <input type="checkbox"/>	Are debts current? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Bank Name:	Overall Account Rating	
	Excellent: <input type="checkbox"/>	
	Satisfactory: <input type="checkbox"/>	
Bank Telephone Number:	Unsatisfactory: <input type="checkbox"/>	

Comments: \_\_\_\_\_

Bank Employee Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

*Thank you, in advance, for your cooperation and assistance.*

**Please return via email or fax to the following:**  
 Arcosa Aggregates Credit Department  
 Email: [Aggcreditapp@arcosa.com](mailto:Aggcreditapp@arcosa.com)  
 Fax: (817) 549-5317

**Arcosa Aggregates**  
 1112 E Copeland Rd, Ste 500  
 Arlington, TX 76011  
 Phone: (469) 304-4315

**JOB INFORMATION SHEET**

CUSTOMER INFORMATION			
COMPANY NAME:		ADDRESS:	
CONTACT NAME:		CITY:	STATE:
PHONE:	EMAIL:	ZIP:	COUNTY:

JOB INFORMATION			
JOB NUMBER AND PO NUMBER:			
JOB TYPE: PUBLIC <input type="checkbox"/>   PRIVATE <input type="checkbox"/>   GOVERNMENT <input type="checkbox"/>			
JOB NAME:		MATERIALS & TONS:	
ADDRESS:			
CITY:	STATE:	ZIP:	COUNTY:

OWNER INFORMATION			
OWNER OF PROPERTY:		ADDRESS:	
PHONE:	CITY:	STATE:	
EMAIL:	ZIP:	COUNTY:	

CONTRACTOR INFORMATION			
GENERAL CONTRACTOR:		ADDRESS:	
PHONE:	CITY:	STATE:	
EMAIL:	ZIP:	COUNTY:	

SURETY & BOND INFORMATION	
NAME OF SURETY:	ADDRESS:

CITY:	STATE:	ZIP:	COUNTY:
PHONE:		EMAIL:	
BONDING AGENT NAME:		BOND NUMBER:	
ADDRESS:			
CITY:	STATE:	ZIP:	COUNTY:
PHONE:		EMAIL:	