

## **Builder Application**

Company Legal Name:			Date:	
Company DBA(s):				
Principal Address:		City:	State:	Zip:
Business e-mail address:	Web Site:	Contact Name:		<u>I</u>
Date Established: Years at Location:	No.of Locations:	Telephone:	Fax:	
Years Under Current Management:	Type of Ownership: (check one	e) □ Corporation □ L.L.C	□ S-Corp □ Partnership □ Proprietorship	
Principals:				
Name:	Title:	Percent of Ownership:	Social Security Number:	
Home Address:	City:	State:	Zip Code:	DOB:
	2.9.			/ /
Name:	Title:	Percent of Ownership:	Social Security Number:	
Home Address:	City:	State:	Zip Code:	DOB:
Name:	Title:	Percent of Ownership:	Social Security Number:	, ,
Home Address:	City:	State:	Zip Code:	DOB:
				/ /
Please List Any and All Affiliations or Buyer's G	Groups:			
Are You a Licensed Insurance Agent?	License Number(s):		State(s) Licensed In:	
Is Financing Centralized?	Finance Manager:		Location:	
Sales Volume Information (if applicable):				
Retail Sales YTD:	Units Sold YTD:	Retail Sales Last Year:	Units Sold Last Year:	
# of construction projects completed w/in last 2	24 months:			
Percentage of Business That is Currently:				
Chattel:	Mortgage:			
New: Used:	Conforming FHA	A Non-Conforming:	REO:	Repo:
References:				
Bank:	Contact:	Telephone:	Average Balance:	
Factory/Product:	Contact:	Telephone:	YTD units purchased:	
Retail:	Contact:	Telephone:	Balance:	Credit Line:
Inventory Financing	Contact:	Telephone:	Balance:	Credit Line:
Inventory Financing	Contact:	Telephone:	Balance:	Credit Line:
	For Countryplace use only	- Do not write below this line		
Factory Reference	Contact:	\$ Product Purchased	# of Units	Standing
Flooring Reference	Contact	Credit Line	Balance	Standing
Provide a short narrative about the Dealer/Buil	der:			

Form #100007