

11513 Route 32 Greenville, NY 966-5333 5477 Route 23 Windham, NY 734-3760 www.gnhlumber.com 30 Bailey Street Coxsackie, NY 731-2737

## CASH TRADE ACCOUNT FORM

Company Name:		
Applicant Name:		
Address:		
City:		Zip:
Phone Number: ()	Fax:( )	
Tax Exempt: Yes No If yes, please attach a Tax Exempt form	n.	
How long would you need this accoun	t for?	
Reason for Account – Project Type		
Description of Business:		
Painter, Electrician, Contractor, Desig	ner, Plumber etc.	
Estimated Annual Sales:		
Signature:		
Date:		
Clerk:		