

#### **INSTRUCTIONS:**

Complete all the information requested below, sign, and return this form. Attachments with relevant information will be accepted. Please allow up to 3 business days for processing. Forms without signature and/or missing information will not be accepted and/or may delay processing.

# All invoices are payable by mail to: CAPA Corporate Office 3609 W Palma Vista Drive Palmview, TX 78572

CAPA Sales Rep. Name:	

A 11.	<b>-</b>	
Credit	Amount	Request:

Magic Valley Concrete LLC \$

App	olicant Information											
Nar	ne:											
Add	dress:						City	:		;	State:	Zip:
Add	If less tha	an one ye	ear at current addre	ss, includ	le a previou	s address	City			;	State:	Zip:
Phone: Cell:								Fax:		Emai	l <b>:</b>	
77	To a f Davis and Alberta and A											
Type of Business ( <i>check all that apply</i> )												
	Proprietorship		Partnership		Corpor	ation		Other	Explain:			
	General Contractor		Sub- Contractor		Other	Explain.	•					
	Business Information											
Nar Nar	siness ne:											
Add	dress:					City:				State:	Zi	p:
Ow Nar	ner's ne:					SSN:						
DO	В:			Drive Licen	r's se No.				State:	Ехрі	iration:	
Dat Ope	e ened:		Net Worth:					Annu Sales		,	Number o Employee	
Fed No.	eral ID						ntrac ense	tor's Stat No.	е		- · ·	
Tax No.	Exempt					Email						
Invo	ice eiver's Name:					Phone	:			Email:		
$\overline{}$												

\*\*\*IMPORTANT\*\*\* Tax Exempt Form: If you do not provide form for project, you will be liable to pay taxes for that project.



Bank References (Fill in below or attach information if necessary)												
Name:								í	Account No.			
Address:								City:		State:	Zip:	
Contact Person:	Email:											
Phone:	Fax:											
Account Type:		Savings		Checking		Loan		Other	(check all that apply)			
Trade References (Provide at least 3 references. Attach sheet for more)												
Name:		(							Account No.			
Address:								City:		State:	Zip:	
Contact Person:	Email:											
Phone:								Fax:				
									Account			
Name:									No.			
Address:								City:		State:	Zip:	
Contact Person:								Email:				
Phone:								Fax:				
									Account			
Name:									No.			
Address:								City:		State:	Zip:	
Contact Person:								Email:				
Phone:								Fax:				



Rio Valley Pipe, LLC | Magic Valley Concrete, LLC | Upper Valley Materials, LLC d/b/a CAPA

Sales & Corporate Offices

3609 W Palma Vista Dr, Palmview, TX 78572 Main Phone: (956) 432-0600 | Sales Fax: 956-583.2086

Sales Email: <a href="mailto:sales@capatexas.com">sales@capatexas.com</a>
Web: <a href="mailto:www.capatexas.com">www.capatexas.com</a>



#### INDIVIDUAL GUARANTY

For valuable consideration, the receipt and sufficiency of which is hereby acknowledged, and in consideration of credit given from time to time to Customer by CAPA, the undersigned does hereby, jointly and severally, guarantee the full and prompt payment to CAPA of all present and future indebtedness of Customer, and the undersigned further agrees to pay all costs and fees as set forth above. This is a continuing, absolute and unconditional Guaranty and shall continue in force with respect to all indebtedness of Customer. The undersigned expressly waives any requirement of prior judgment, notice, demand, or other collection attempts against Customer. This Guaranty shall be binding upon the heirs, executors, administrators, successors and assigns of the undersigned and shall insure to and may be enforced by CAPA, its successors and assigns, or by any person or entity to whom all or any part of said indebtedness may be sold or transferred.

El Solicitante acepta que en contraprestación por la extensión del crédito al Solicitante por parte de CAPA DBA Rio Valley Pipe, LLC; Magic Valley Concrete, LLC; y Upper Valley Materials, LLC, en lo sucesivo denominadas "Compañías"; El solicitante acepta cumplir con los términos de venta y entrega como se especifica en la cotización y/o el boleto de entrega. Además, el Solicitante acepta pagar el monto adeudado por los productos y servicios prestados en o antes de la fecha de vencimiento del pago. Si el Solicitante no paga el monto adeudado en o antes de la Fecha de vencimiento del pago, el Solicitante acepta pagar intereses sobre el monto adeudado al 18 % anual o al 1.5 % mensual a partir del día posterior a la Fecha de vencimiento del pago y continuando hasta que la cantidad adeudada sea pagada en su totalidad. En caso de incumplimiento, y si esta cuenta se entrega a una agencia o abogado para el cobro, el solicitante abajo firmante acepta pagar todos los honorarios razonables o el costo de los cobros, ya sea que se presente o no una demanda.

# 

Fax completed form and any accompanying document(s) to: (956) 583-2086 or Email: collections@capatexas.com

Approved by (Only Credit Department)



FINANCIAL TERMS

Rio Valley Pipe, LLC | Magic Valley Concrete, LLC | Upper Valley Materials, LLC d/b/a CAPA

Sales & Corporate Offices

3609 W Palma Vista Dr, Palmview, TX 78572

Main Phone: (956) 432-0600 | Sales Fax: 956-583.2086

Sales Email: <u>sales@capatexas.com</u> Web: www.capatexas.com

CAPA Form: CREDITAGREEMENT (Rev: 1.3-112719LV)



#### **INSTRUCTIONS:**

Complete all the information requested below, sign, and return this form. Attachments with relevant information will be accepted. Please allow up to 3 business days for processing. Forms without signature and/or missing information will not be accepted and/or may delay processing.

# All invoices are payable by mail to: CAPA Corporate Office 3609 W Palma Vista Drive Palmview, TX 78572 CAPA Sales Rep. Name: Credit Amount Request: Credit Amount: \$ Credit Amount: \$ Credit Amount: \$

Арр	licant Informatio	n											
Nan	ne:									-			
Address:								:		s	tate:	Zip:	
Add	If les	łress, inclu	de a previou	s address	City	:		s	tate:	Zip:			
Pho	Phone: Cell:							Fax:		Email:			
T	Type of Business (check all that apply)												
Тур	e of Business (a	neck all	tnat appry)										
	Proprietorshi	р 🗆		<b>D</b>	Corpor	ation		Other	Explain:				
	General Contractor		Sub- Contractor		Other	Explain	:						
	iness Informatio	n											
Bus Nan	siness ne:												
Add	lress:					City:				State:	Zip:		
Ow Nar	ner's ne:					SSN:							
DO	3:			Drive Licer	er's nse No.				State:	Expir	ation:		
Date Ope	e ened:		Net Worth	n:				Annu Sales			Number of Employees:		
Fed No.	eral ID						ntrac ense	tor's Stat No.	e				
Tax No.	Exempt					Email	:						
Invo Rec	ice eiver's Name:					Phone	<u>;</u>			Email:			

\*\*\*IMPORTANT\*\*\* Tax Exempt Form: If you do not provide form for project, you will be liable to pay taxes for that project.



Bank References (Fill in below or attach information if necessary)												
Name:								í	Account No.			
Address:								City:		State:	Zip:	
Contact Person:	Email:											
Phone:	Fax:											
Account Type:		Savings		Checking		Loan		Other	(check all that apply)			
Trade References (Provide at least 3 references. Attach sheet for more)												
Name:		(							Account No.			
Address:								City:		State:	Zip:	
Contact Person:	Email:											
Phone:								Fax:				
									Account			
Name:									No.			
Address:								City:		State:	Zip:	
Contact Person:								Email:				
Phone:								Fax:				
									Account			
Name:									No.			
Address:								City:		State:	Zip:	
Contact Person:								Email:				
Phone:								Fax:				



Rio Valley Pipe, LLC | Magic Valley Concrete, LLC | Upper Valley Materials, LLC d/b/a CAPA

Sales & Corporate Offices

3609 W Palma Vista Dr, Palmview, TX 78572 Main Phone: (956) 432-0600 | Sales Fax: 956-583.2086

Sales Email: <a href="mailto:sales@capatexas.com">sales@capatexas.com</a>
Web: <a href="mailto:www.capatexas.com">www.capatexas.com</a>



#### INDIVIDUAL GUARANTY

For valuable consideration, the receipt and sufficiency of which is hereby acknowledged, and in consideration of credit given from time to time to Customer by CAPA, the undersigned does hereby, jointly and severally, guarantee the full and prompt payment to CAPA of all present and future indebtedness of Customer, and the undersigned further agrees to pay all costs and fees as set forth above. This is a continuing, absolute and unconditional Guaranty and shall continue in force with respect to all indebtedness of Customer. The undersigned expressly waives any requirement of prior judgment, notice, demand, or other collection attempts against Customer. This Guaranty shall be binding upon the heirs, executors, administrators, successors and assigns of the undersigned and shall insure to and may be enforced by CAPA, its successors and assigns, or by any person or entity to whom all or any part of said indebtedness may be sold or transferred.

El Solicitante acepta que en contraprestación por la extensión del crédito al Solicitante por parte de CAPA DBA Rio Valley Pipe, LLC; Magic Valley Concrete, LLC; y Upper Valley Materials, LLC, en lo sucesivo denominadas "Compañías"; El solicitante acepta cumplir con los términos de venta y entrega como se especifica en la cotización y/o el boleto de entrega. Además, el Solicitante acepta pagar el monto adeudado por los productos y servicios prestados en o antes de la fecha de vencimiento del pago. Si el Solicitante no paga el monto adeudado en o antes de la Fecha de vencimiento del pago, el Solicitante acepta pagar intereses sobre el monto adeudado al 18 % anual o al 1.5 % mensual a partir del día posterior a la Fecha de vencimiento del pago y continuando hasta que la cantidad adeudada sea pagada en su totalidad. En caso de incumplimiento, y si esta cuenta se entrega a una agencia o abogado para el cobro, el solicitante abajo firmante acepta pagar todos los honorarios razonables o el costo de los cobros, ya sea que se presente o no una demanda.

# 

Fax completed form and any accompanying document(s) to: (956) 583-2086 or Email: collections@capatexas.com

Approved by (Only Credit Department)



FINANCIAL TERMS

Rio Valley Pipe, LLC | Magic Valley Concrete, LLC | Upper Valley Materials, LLC d/b/a CAPA

Sales & Corporate Offices

3609 W Palma Vista Dr, Palmview, TX 78572

Main Phone: (956) 432-0600 | Sales Fax: 956-583.2086

Sales Email: <u>sales@capatexas.com</u> Web: www.capatexas.com

CAPA Form: CREDITAGREEMENT (Rev: 1.3-112719LV)

CAPA Sales Rep. Name:



Credit Amount:

#### **INSTRUCTIONS:**

Complete all the information requested below, sign, and return this form. Attachments with relevant information will be accepted. Please allow up to 3 business days for processing. Forms without signature and/or missing information will not be accepted and/or may delay processing.

# All invoices are payable by mail to: CAPA Corporate Office 3609 W Palma Vista Drive Palmview, TX 78572 Credit Amount Request: Upper Valley Materials LLC \$

App	olicant Information												
Nan	ne:										=,,		
Add	dress:						City	:		s	tate:		Ζip:
Add	If less tha	n one y	ear at current addres	ss, includ	le a previou:	s address	City	:		s	tate:		Zip:
Phone: Cell:								Fax:		Email:			
-	To a f Davis and Alberta and A												
Тур	Type of Business (check all that apply)												
	Proprietorship		Partnership		Corpor	ation		Other	Explain:				
	General Contractor		Sub- Contractor		Other	Explain	:						
	Business Information												
Bus Nan	siness ne:												
Add	dress:					City:				State:		Zip:	
Ow Nan	ner's ne:					SSN:							
DO	B:			Drive Licen	r's se No.				State:	Expir	ration:		
Date Ope	e ened:		Net Worth:					Annu Sales			Number Employ		
Fed No.	eral ID						ntrac ense	tor's Stat No.	е				
Tax No.	Exempt					Email	:						
Invo	oice eiver's Name:					Phone	<b>:</b>			Email:			

\*\*\*IMPORTANT\*\*\* Tax Exempt Form: If you do not provide form for project, you will be liable to pay taxes for that project.



Bank References (Fill in below or attach information if necessary)												
Name:								í	Account No.			
Address:								City:		State:	Zip:	
Contact Person:	Email:											
Phone:	Fax:											
Account Type:		Savings		Checking		Loan		Other	(check all that apply)			
Trade References (Provide at least 3 references. Attach sheet for more)												
Name:		(							Account No.			
Address:								City:		State:	Zip:	
Contact Person:	Email:											
Phone:								Fax:				
									Account			
Name:									No.			
Address:								City:		State:	Zip:	
Contact Person:								Email:				
Phone:								Fax:				
									Account			
Name:									No.			
Address:								City:		State:	Zip:	
Contact Person:								Email:				
Phone:								Fax:				



Rio Valley Pipe, LLC | Magic Valley Concrete, LLC | Upper Valley Materials, LLC d/b/a CAPA

Sales & Corporate Offices

3609 W Palma Vista Dr, Palmview, TX 78572 Main Phone: (956) 432-0600 | Sales Fax: 956-583.2086

Sales Email: <a href="mailto:sales@capatexas.com">sales@capatexas.com</a>
Web: <a href="mailto:www.capatexas.com">www.capatexas.com</a>



#### INDIVIDUAL GUARANTY

For valuable consideration, the receipt and sufficiency of which is hereby acknowledged, and in consideration of credit given from time to time to Customer by CAPA, the undersigned does hereby, jointly and severally, guarantee the full and prompt payment to CAPA of all present and future indebtedness of Customer, and the undersigned further agrees to pay all costs and fees as set forth above. This is a continuing, absolute and unconditional Guaranty and shall continue in force with respect to all indebtedness of Customer. The undersigned expressly waives any requirement of prior judgment, notice, demand, or other collection attempts against Customer. This Guaranty shall be binding upon the heirs, executors, administrators, successors and assigns of the undersigned and shall insure to and may be enforced by CAPA, its successors and assigns, or by any person or entity to whom all or any part of said indebtedness may be sold or transferred.

El Solicitante acepta que en contraprestación por la extensión del crédito al Solicitante por parte de CAPA DBA Rio Valley Pipe, LLC; Magic Valley Concrete, LLC; y Upper Valley Materials, LLC, en lo sucesivo denominadas "Compañías"; El solicitante acepta cumplir con los términos de venta y entrega como se especifica en la cotización y/o el boleto de entrega. Además, el Solicitante acepta pagar el monto adeudado por los productos y servicios prestados en o antes de la fecha de vencimiento del pago. Si el Solicitante no paga el monto adeudado en o antes de la Fecha de vencimiento del pago, el Solicitante acepta pagar intereses sobre el monto adeudado al 18 % anual o al 1.5 % mensual a partir del día posterior a la Fecha de vencimiento del pago y continuando hasta que la cantidad adeudada sea pagada en su totalidad. En caso de incumplimiento, y si esta cuenta se entrega a una agencia o abogado para el cobro, el solicitante abajo firmante acepta pagar todos los honorarios razonables o el costo de los cobros, ya sea que se presente o no una demanda.

# Net Term 10 days. APPLICANT Signed: \_\_\_\_\_\_ Print Name: \_\_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_ Approved by (Only Credit Department)

Fax completed form and any accompanying document(s) to: (956) 583-2086 or Email: collections@capatexas.com



Rio Valley Pipe, LLC | Magic Valley Concrete, LLC | Upper Valley Materials, LLC d/b/a CAPA

Sales & Corporate Offices

3609 W Palma Vista Dr, Palmview, TX 78572

Main Phone: (956) 432-0600 | Sales Fax: 956-583.2086

Sales Email: <u>sales@capatexas.com</u> Web: www.capatexas.com

CAPA Form: CREDITAGREEMENT (Rev: 1.3-112719LV)