



605-785-3381 | 605-785-3589 fax

Cash Account Application

Business Name (if applicable) _____

Name: _____

Phone Number: _____

Email: _____

Mailing Address: _____ PO Box (if applicable) _____

City _____ State _____ Zip Code _____

If claiming tax exemption provide exemption certificate

- Sign me up for online access to my account. I have provided my email address above.
- Please add my credit/debit card on file

Card number _____ Expiration date _____ CVV _____

By signing below, I authorize Hamlin Building Center, Inc. or its representatives to set up my cash account with all above listed information. I agree to terms of 100% deposit before ordering special order items. I agree to pay 100% deposit on all items before delivery.

Print _____

Signed _____ Date _____

Attn: Accounts Receivable
PO Box 200
Lake Norden, SD 57248
Email: receivables@hamlinbc.com