



ACCOUNT SIGNING PERMISSION

Date: _____

I, _____ give authority for the following individuals to use the credit on my Kirich Industries Limited Partnership account.

Account # _____

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

AND/OR

- Purchase orders must be used.

I understand and agree that I am responsible for any and all charges, including accrued interest that the above individuals purchase on my account.

Account holder's signature

Email address

MAIN OFFICE (867) 668-5958
FAX (867) 668-3682

SALES EXT.1 | TRUSS PLANT EXT.2
ACCOUNTS EXT.3