

TODAY'S DATE: _____

IMI MAP CODE: _____

Measure request for:

International Marble Industries, Inc.
304 Bell Park Drive • Woodstock, GA • 30188
(Ph) 770-928-2252 • (Fax) 770-928-5791

SUBDIVISION: _____

LOT: _____

CALLER: _____

BUILDER CO: _____

CELL PHONE: _____

BLDR FAX NBR _____

REQ. MEASURE DATE: _____

REQ. INSTALL DATE: _____

PLAN NAME: _____

GAR LOC: _____

	<u>COLOR</u>	<u>SPREAD</u>	<u>IMI WILL INSTALL BY:</u>
TUB: WP:			____/____/____
SHOWER BASE			____/____/____
MBR TOPS			____/____/____
D/S PDR			____/____/____
SEC. BATH			____/____/____
BAS. BATH			____/____/____
FLAT WORK			____/____/____

TO THE BUILDER: IF YOU CAN FAX IN THIS SHEET TO IMI, WE WILL IN RETURN FAX A CONFIRMED DELIVERY DATE TO YOU AS SOON AS THE ORDER IS PROCESSED:

IMI USE ONLY: FAXED ON _____ by _____



INTERNATIONAL MARBLE INDUSTRIES, INC.

304 Bell Park Drive • Woodstock, GA 30188
Office (770) 928-2252 • Fax (770) 928-5791
Email: IntlMarbleInd@msn.com

Rev 04/96

SERVICE REQUEST/JOB ORDER

Call in date:	_____	If vacant home, closing date:	_____
Subdivision:	_____	If occupied: (Name)	_____
Lotnbr:	_____	(Streetaddr.)	_____
Install date:	_____	Home Phone:	_____
Called in by:	_____	Work Phone:	_____
Nextel/Cell:	_____	Access to home?	_____
Builder:	_____	To be serviced by:	_____
Still under bldr/IMI warr.?	_____	Appt. made for:	_____

Description of service work to be performed:

Actual service work performed:

Date:	Technician:	Work performed:	Time start	Time finish

Comments:

Setup		Pouring		Gelcoat		Grinding	
Whirlpool		Finish		Installation		Construction Damage	

Builder Scheduling Tool for ordering cultured marble products

When ordering tubs and/or shower pans

TIMING: AFTER framing is finished (PERMANENT STAIRS MUST BE IN), BEFORE plumbing rough

If the master bath is on the FIRST floor:

- | | |
|---|-----------------------------|
| Is the second floor fully framed? | If NO, action by => FRAMER |
| Have the braces been removed? | If NO, action by => FRAMER |
| Has the window in the tub area been framed in full? | If NO, action by => FRAMER |
| If on a slab, did the plumber install his booth around drain? | If NO, action by => PLUMBER |

If the master bath is on the SECOND floor

- | | |
|--|----------------------------|
| Are the PERMANENT stairs installed? | If NO, action by => FRAMER |
| Has the LANDING been built? | If NO, action by => FRAMER |
| Is the ROOF fully decked | If NO, action by => FRAMER |
| Has the WINDOW been framed in? | If NO, action by => FRAMER |

HAS THE GUARD RAIL SYSTEM BEEN INSTALLED? If NO, action by => BUILDER

IMI EMPLOYEES WILL NOT DELIVER OR INSTALL SCHEDULED ITEMS IF NO GUARD RAIL SYSTEM IS IN PLACE. SHOULD THEY ENCOUNTER THIS SITUATION, THE IMI / OSHA SAFETY OFFICER WILL BE NOTIFIED!

Access to the house:

- | | |
|--|----------------------------|
| Is the house accessible from either garage or front door
(no drop off coming out of the house) | If NO, action by => FRAMER |
|--|----------------------------|

HAS TUB & WHIRLPOOL BEEN SITE TESTED BEFORE SKIRT & TRIM **IF NO, BUILDER CALL IMI**

When ordering shower walls and vanity tops

TIMING After priming of the walls

- | | |
|---|--------------------------------|
| Are the vanity bases fully installed ? | If NO, action by => CABINET Co |
| Have cabinet braces been cut to allow for bowl to fit? | If NO, action by => CABINET Co |
| <u>Has the shower pan and tub been drained of water and other fluids?</u> | If NO, action by => BUILDER |

IMI employees WILL NOT be responsible for draining/cleaning tubs or shower pans. Should they encounter this situation, a Not Job Ready form will be completed and a "Dry Run" fee charged.

- | | |
|--|-----------------------------|
| NO double sheetrock on master shower ? | If NO, action by => BUILDER |
| IF hall tub surrounds needed, SINGLE sheetrock only? | If NO, action by => BUILDER |
| Will Painters be finished? | If NO, action by => BUILDER |
| Are we scheduled BEFORE or AFTER tile install (NOT DURING)? | INFORM IMI |

When ordering "skirt" (tub front) and trim

TIMING Check if bathroom will get tile or carpet

- If carpet => tub front to go in preferably PRIOR to carpet install
If tile => tub front to go in AFTER tile install

- | | |
|---|-----------------------------|
| Is tile ran 2" past tub lip towards the tub bowl? | If NO, action by => TILE Co |
|---|-----------------------------|

Make sure plumbing is HOOKED UP If NO, action by => PLUMBER

Make sure "whole house" electric is HOOKED UP If NO, action by => BUILDER

Make sure plumbing is NOT protruding past the tub lip If NO, action by => PLUMBER

Make sure electric outlet is as close as possible to Whirlpool motor If NO, action by => BUILDER

When ordering "pedestal" for powder room

TIMING After first coat on hardwoods or tile is in

- | | |
|---|-------------------|
| Do hardwoods have at least one coat on? | SCHEDULE with IMI |
| Will plumber install pedestal or IMI? | |

WHEN REQUESTING SERVICE, WHOLE HOUSE PLUMBING & ELECTRIC MUST BE AVAILABLE!

International Marble Industries, Inc.
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(Ph) 770-928-2252 • (Fax) 678-388-2648

Today's Date: _____ Monthly Credit Requested: _____

Proprietorship
 Partnership
 S Corporation
 C Corporation State Of Incorporation: _____ Year of Incorporation: _____

The following information is required to set up a charge account with IMI. An owner or an officer who can legally bind your company must sign this application. If these conditions are not met, we cannot process this credit application, as it would not satisfy the conditions of a legally binding agreement.

Legal Business Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Owner/CEO/Officer: _____ Email: _____

Telephone: _____ Fax: _____

Title: _____ Years In This Position: _____ Years With Company: _____

A/P Contact: _____ Telephone: _____ Email: _____

DBA (if different from above): _____

Address For Statements or Invoices (if different): _____

City: _____ State: _____ Zip Code: _____

Local Manager/Officer: _____ Telephone: _____ Nextel: _____

Title: _____ Years In This Position: _____ Years With Company: _____

Local A/P Contact: _____ Telephone: _____ Nextel: _____

Which Method of Credit Do You Wish To Establish?

Statement – A statement will be mailed to you at the first of the month, all invoices from the previous month will be due for payment on or before the 10th of the month. If payment has not been received by the 20th, your account will be placed on C.O.D. If you are habitually late regarding payments, your credit privileges will be revoked.

Payment by Invoice – An invoice will be mailed to you on the install date. This will be the only invoice you will receive. Payment should be made in full within 30 days of the invoice date. If invoice is not paid within 45 days, your account will be placed on C.O.D. It is your sole responsibility to collect and pay all invoices per this agreement. If you are habitually late regarding payments, your credit privileges will be revoked.

****Payment can be made by check or credit card****

Any change in credit method is the sole responsibility of credit applicant and must be made by an owner or officer who can legally bind the company. All requests for such changes must be made in writing. We reserve the right to request additional information if such request are made.

Initial: _____ Date: _____

IMI Commercial Credit Application (continued)

Does Your Company Require Purchase Orders?

Yes Name of Persons Who Can Authorize Purchases: _____

No Additional Authorized Persons: _____

If yes, should service/installations be held up until P.O. # is issued? Yes _____ No _____ Other _____

It is the responsibility of your company to pay all invoices authorized by any of the above personnel. Any changes regarding who is authorized to approve repairs, must be provided in writing, and is the sole responsibility of your company.

Financial Institution

Name: _____ **Office/Branch:** _____

Telephone: _____ **Officer:** _____

Number of Years: _____ **Account Number:** _____

Local Trade References

1) Trade Name: _____ **Contact:** _____

Phone: _____ **Fax:** _____

2) Trade Name: _____ **Contact:** _____

Phone: _____ **Fax:** _____

3) Trade Name: _____ **Contact:** _____

Phone: _____ **Fax:** _____

Note: These references should be local and should include companies you have at least one year of credit history.

In consideration for credit being extended, I or we acknowledge we have read and do agree with the terms and conditions stated on the above two pages and to the following: 1) Credit is a privilege extended by IMI to our company. 2) The terms of such privilege are established solely by IMI. 3) Payment is jointly, severally, and unconditionally guaranteed within the guidelines as set forth in the agreement. 4) Any charges still outstanding after 90 days from invoice are subject to collection. All collection, arbitration expense, attorneys' fees, and court costs will be borne by the purchaser. 5) **When the invoice is 60 days past due, a lien against the property where the installation was performed, shall be filed and a \$125 lien charge added to your account. The lien shall be enforceable equal to the full amount of outstanding charges until all charges are collected.** 6) All claims, request for adjustments, or notification of errors must be made in writing within 30 days of the invoice date, or charges are considered accepted. 7) Credit privileges may be withdrawn at anytime without invalidating the terms of this agreement. 8) These terms become part of any and all Subcontractor Agreements.

Authorized
Signature: _____ **Title:** _____ **Date:** _____

Authorized signature must be an owner or officer who can legally negotiate and sign contracts for your company. Someone representing your company in this capacity must sign credit application, or it will not be processed.

Credit Cannot Be Extended Until This Application Is Completed, Received, And Approved.

