



**Logging Services
& Exchange, LLC**



All NCAPL members get
35% off Fasteners
15% off Power Tools
20% off everything else

***See prices below for special
member pricing**

FASTENAL®

www.loggingservices.biz

www.ncloggers.com



1007002- Clear Safety Glasses
\$0.99 Each



1008770- 5 Gallon Bucket Spill Kit
\$32.66 Each



2555-0104143-ESK 1 Size Orange
Mesh Safety Vest
\$3.57 Each



1010044-Lime Polyester
Non-Certified Standard
Safety Vest
\$4.70



2555-0117152-18" x 18" Flag
Standard, Warning Flag
\$2.87



1014481 - First Aid Kit- Plastic
\$18.50



7025613- 15GPM 1/4hp 12'L
Hose 16A 12V Pump W/Auto
Nozzle
\$369.68



0401864- 5/8" 1/10HP 8GPM
Cast Aluminum 12v Electric
Manual Pump
\$206.42



0210611-4-1/2"Dia 8Amp 120V
AC/DC Paddle Switch Grinder
\$88.88



0210840-D28474W 7" 15 Amp
8,000 RPM Large Angle
Grinder
\$159.99



All Eaton Weatherhead JIC
Hose Ends
20% off



58874-Pistol Grip Grease Gun
w/Flexible Hose
\$24.87



0401434- Battery Operated
(Dual Battery) Grease Gun
\$226.81



1591-255- IR-258 3/4"Sq
1000ft-lb 6200rpm HD Air
Impact Wrench
\$399.99



0210635- IR-285B-6 1"Sq
20.1"L HD Ext Anvil Air
Impact Wrench
\$499.99

Set up your account with your local representative and order online at:

www.fastenal.com

Local Stores and Delivery! We are where you are!

Valid March, 2011- May 2011



Member Admission Notification and Application for Credit

If you have a trade reference sheet with pertinent information, you may send that and sign the bottom.

Please fax to 507-494-6547

Client Name: _____ Date: _____

Fastenal Account Number (EX:NCRAL00001, if you don't have one or know it, please leave it blank) _____

Years in Business _____

Tax Exempt? No Yes ID # _____ If yes; Please include copy of tax exempt certificate.

Do you wish to open a line of credit with Fastenal?

Yes No (if no, you will be expected to pay COD or Credit Card and are not required to fill out the remainder of this form)

Corporation Partnership Individual/Sole proprietor Other _____

Business Address _____ City _____ State _____ Zip _____
() _____ () _____

Phone _____ Fax _____ Account Payable Email Address _____

Billing Address _____ City _____ State _____ Zip _____
() _____ () _____

Phone _____ Fax _____ Contact Name _____

PRINCIPALS:

Name of Principal _____ Position _____ Address _____ Phone _____

Name of Principal _____ Position _____ Address _____ Phone _____



Has the Applicant, or any principal, ever filed for bankruptcy? _____ When? _____

FINANCE:

Bank	Account Number	Type
_____	(____) _____	(____) _____
Address	Phone	Fax
_____	_____	_____

REFERENCES:

1. _____

Business Name	Phone
_____	_____
Address	Fax
_____	_____

2. _____

Business Name	Phone
_____	_____
Address	Fax
_____	_____

3. _____

Business Name	Phone
_____	_____
Address	Fax
_____	_____

Terms: Fastenal credit terms are Net 30 days from receipt of invoice. Statements and invoices will be paid in accordance with terms set forth by Fastenal. **Certification:** I/We certify that all information on this application is correct and the listed bank and references are authorized to release appropriate information to Fastenal, which will be held in confidence, necessary for credit approval and that an authorized officer, owner, partner or representative has signed this application.

By signing below, I/we acknowledge and agree to the foregoing conditions.

The following are authorized to purchase:	Applicant: _____
_____	By: _____
_____	Title: _____ Date: _____
_____	Principal: _____

All employees authorized to purchase Credit amount requested: \$ _____