



JOINT CHECK AGREEMENT

Email, Fax or Mail to:

P.O. Box 728

La Mirada, CA 90637

tami@royalplywood.com

Accounting Fax: 562.207.1383

THIS AGREEMENT, entered into this _____ day of _____, between _____, (hereinafter referred to as Subcontractor, _____, (hereinafter referred to as Prime Contractor), and Royal Plywood Co., LLC, (hereinafter referred to as the Supplier), and _____, (hereinafter referred to as the Original Contractor.)

WITNESSETH

1. The aforesaid parties agree that any invoice hereafter rendered by _____ to, Subcontractor covering materials purchased for use on the project at _____, Contract No., _____, (hereinafter known as the project), shall be paid within a reasonable time upon receipt by the Prime Contractor of payments from the Owner, but not in excess of the amount approved on the Subcontractor's invoice, by negotiable check drawn by the Prime Contractor and made payable jointly to the Subcontractor and Supplier. All joint checks shall be forwarded to Supplier upon receipt. Subcontractor shall endorse said checks and forward them to Supplier.
2. The sole purpose of this joint check agreement is to provide for the payment of invoices rendered by the Supplier on their sales of materials and/or labor to Subcontractor for use in the above referenced project. This agreement does not constitute an assignment of funds, and, except to the extent of payments actually received, the execution of this Agreement and the taking of such joint checks shall not affect nor otherwise impair any bond, lien, or other creditor rights and remedies which the Supplier now has or may hereafter have arising from their sales to Subcontractor of materials for this project.

IN WITNESS WHEREOF, THE PARTIES HERETO HAVE EXECUTED THIS AGREEMENT.

Prime Contractor

By: _____

Title: _____

Date: _____

Royal Plywood Co, LLC

Supplier

By: _____

Title: _____

Date: _____

Sub-Contractor

By: _____

Title: _____

Date: _____

Original Contractor

By: _____

Title: _____

Date: _____

PRELIMINARY INFORMATION

DATE: _____ CUSTOMER # _____

CUSTOMER NAME: _____

ADDRESS: _____

CITY: _____ PHONE: _____

JOB SET UP INFORMATION NEEDED

JOB/SHIP TO # _____ SALESPERSON: _____ TAX CODE: _____

JOB NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODES: _____

ESTIMATED CONTRACT AMOUNT: _____

PRELIMINARY NOTICE INFORMATION

ESTIMATED FIRST DELIVERY DATE: _____

A) LENDER _____

ADDRESS _____

CITY _____

B) OWNER _____

ADDRESS _____

CITY _____

C) GEN. CONTRACTOR _____

ADDRESS _____

CITY _____

D) BONDING CO. _____

ADDRESS _____

CITY _____

E) ORIGINAL SUB _____

ADDRESS _____

CITY _____