



Lowe's Discount Program

Exclusively for ARPOLA Members



- ◆ Lowe's Accounts Receivable (LAR) Card
- ◆ Deep Immediate Discounts*
- ◆ \$20 delivery*
- ◆ Excellent Customer Service from the Lowe's Commercial Desk at your local store
- ◆ And much more!

Lowe's Purchases with Lowe's Accounts Receivable (LAR) Card – **ARPOLA Recommended**

The Lowe's LAR card is not a credit card. It's an accounts receivable card. Lowe's will apply a 2% rebate to your account every month for prompt payment of your card. Through the www.lowesforpros.com website you can also track your spending and add or delete additional cardholders. You can organize your purchases by property. The LAR is a great tool for you as a rental property owner or manager!

1. **Complete the attached application** for the Lowe's Account Receivable (LAR) card.
2. **Send your completed LAR** application to Lowe's by one of the following:
 - a. Fax application to 1-877-539-9340 **OR**
 - b. Email application to bryan.houser@lowes.com. (Approvals take up to 10 business days.)
3. Lowe's will contact you via phone with your approval.
4. **Return to the ARPOLA Member's area** and setup your Lowe's Quotation Center account.
 - a. Visit www.arpola.org, Click on Member/Guest Log-In, Enter your ARPOLA User ID & Password, then select the "National Programs" option (in the side menu bar) and choose the Lowe's Program Information and click on the blue button titled "Online Quotation Center".
 - b. Use the ARPOLA national ID# **MuHMEp6BAoFu** during the registration process.
 - c. You will need to establish a User Name and Password that you will use each time to sign in to the Lowe's Quotation Center. You can begin using the Quotation Center to place orders but will not receive the LAR rebate until you credit application is approved.
5. Enjoy saving at your local Lowe's store through ARPOLA!

Need help? Contact Lowe's for Assistance using the numbers below.

LAR Application Questions:

Contact Bryan Houser at 623-414-0920.

Online Product Ordering System:

Contact the online support center at (704) 757-4141.

Order Questions:

Contact the Commercial Sales desk at your local store. Locate a store [here](#).

LAR Billing Questions:

1-800-950-4134

**Complete program information in the ARPOLA Member's Area.*

Lowe's Accounts Receivable (LAR) Credit Application

APPLICANT: Please read the following before completing this form. (1) Applicant represents that the information given in this Application is complete and accurate and authorizes us to check with credit reporting agencies, credit references and other sources we deem appropriate in investigating it. (2) Signatory must be a proprietor, general partner or officer of the company with authority to enter into contractual agreements to borrow money. (3) The Personal Guaranty section (Section 3) can only be completed by an owner/officer or other authorized individual. (4) Please read the attached Key Credit Terms and sign below before submitting your application.

SECTION 1 — Account Information

Will this account be used for new construction? Yes No (If yes, please also complete Section 6.)
 Is your business tax exempt? Yes No (If yes, please provide tax exempt certificate to store.)
 If you want to limit single purchase amounts, enter the amount here: \$ _____
 Is a PO required with account purchases? Yes No Enter additional purchasing instructions, if any: _____
 Estimated Monthly Account Usage \$ _____
 Please provide the full name of each Authorized Buyer, including yourself. (Check the box if you want a Buyer ID Card issued for each Authorized Buyer added):
 Name _____ Name _____ Name _____

SECTION 2 — Company Information

Company/Applicant Full Legal Name (Account will be set up in this name) _____
 DBA Name (if different than Legal Name) _____
 Street Address (Street Name and Number Required) _____ City _____ State _____ Zip _____
 Phone No. _____ Tax ID* (or fei #) _____
 *Required by USA Patriot Act. Social Security # may be provided if business is a sole proprietorship and you do not have a Tax ID.
 Parent Co. Name _____ Provide E-mail Address here (optional): _____
 By providing your e-mail address to Lowe's, GE Capital Financial Inc. and their affiliates, you consent to receive e-mail communications about your Lowe's business credit account, special offers and updates.
Business Type Corporation Proprietorship LLC Government Non-Profit Limited Partnership
Business Description Construction Repair/Remodel Retail Specialty Trade Property Mgt. Govt./School/Org Business Other
 No. of Employees _____ Year Business Started _____ \$ Annual Revenue _____

SECTION 3 — Personal Guaranty

To increase the likelihood of approval, you should be able to answer Yes to one of the following statements:
 1. The company has been in business for more than three years.
 Or, 2. I am willing to personally guarantee this account.
 Or, 3. The company is an established business but does not have an established business credit history, and therefore, I am willing to offer a Personal Guaranty.
To offer a Personal Guaranty, please complete the information below:
 Business Principal Yes No Guarantor's Title _____
 First Name _____ M.I. _____ Last Name _____
 Home Address _____
 (Street Name and Number Required)
 City _____ State _____ Zip _____
 Phone No. _____ Alternate Phone No. _____ Date of Birth _____
 Social Security No. _____ Annual Income _____
 Personal Guarantor Signature _____ Date _____

If you sign this section of the Application, you agree to jointly and severally, unconditionally personally guarantee the performance of all obligations under, and the payment upon demand of all amounts due on the Lowe's Accounts Receivable Account that is opened with this Application, without requiring us to first pursue the buyer also liable on the Account. You also waive any notices regarding the governing credit agreement or this Guaranty. This Guaranty shall be in effect until the Agreement has terminated and all amounts due thereunder have been fully paid. Guarantor agrees that if the Account is not paid as agreed, the creditor may report Guarantor's liability for and the status of the Account to credit bureaus and others who may lawfully receive such information. You also understand and agree that your personal credit will be used in making credit decisions on the Account and consumer reports and other inquiries regarding your credit may be obtained from time to time by the creditor or any assignee in connection with the Account.

SECTION 4 — Required Signature of Authorized Officer/Owner

(This section must be completed.)
 By signing below on behalf of your business, you are applying for a Lowe's Accounts Receivable Account. You represent that your business is a valid business entity, all purchases made on this Account, if approved, will be for business purposes and not for personal, family or household use and you are an authorized representative of the business with authority to enter into contractual agreements to borrow money. On behalf of the business, you understand the Lowe's Accounts Receivable Agreement will govern the Account and that the Agreement will be provided to you upon approval of the Application. You can review the full Agreement by visiting www.lowescreditcenter.com; simply go to the Lowe's Business Credit Accounts section and click on 'Learn More', then go to the Lowe's Account Receivable section and click on 'Apply Now'. The Lowe's Accounts Receivable Agreement is governed by federal and North Carolina Law. You authorize us and our assignees to obtain information about you personally (whether or not you have personally guaranteed the account) for purposes of updates, renewals or extension of credit granted as a result of this Application, or in receiving or collecting the Account. You also understand that credit on this Account, once approved, will be extended by, or interests in the indebtedness on your Account may be assigned to GE Capital Financial Inc. and that there is no binding contract between us until your Application is approved. You consent to Lowe's, GE Capital Financial Inc. and any other owner, assignee or servicer of the Account contacting you about the Account, including using any contact information or cell phone numbers you provide, and you consent to the use of any automatic telephone dialing system and/or an artificial or prerecorded voice when calling you, even if you are charged for the call under your phone plan. You understand that Lowe's or its assignee may have the right to place a materialman's lien on the property to which the purchases on the Account were delivered and/or incorporated.

Federal Law requires us to obtain, verify and record information that identifies you when you open an account. We will use your name, address, taxpayer ID# and other information for this purpose.

Signature of authorized officer/owner _____
 Name Printed _____ Date _____
 Driver's License No. (or State Photo ID No.) _____
 Secondary ID No. (Military ID, Bank or Credit Card) _____

Directions for Applicant: 1) Please complete and sign application
2) Fax application to 1-877-539-9340
3) Please retain application for your records

DCAS Contact: Bryan Houser



SECTION 5 — Billing Information

Billing Contact _____
 Billing Address _____
 City _____ State _____ Zip _____
 Phone No. _____ Fax No. _____

SECTION 6 — Complete for New Construction

Bolded fields are required.

Project Information

Project Name _____
Project Street Address _____
(Street Name and Number Required)
City _____ **State** _____ **Zip** _____

Property Information

Property Owner Name _____
Project Street Address _____
(Street Name and Number Required)
City _____ **State** _____ **Zip** _____
 Owner Phone No. _____

General Contractor Information

General Contractor Name _____
General Contractor Address _____
(Street Name and Number Required)
City _____ **State** _____ **Zip** _____
General Contractor Phone No. _____
Contract No. _____

KEY CREDIT TERMS FOR LOWE'S ACCOUNTS RECEIVABLE ACCOUNT (LAR):

Payment is due in full each billing period.		
Annual percentage rate (APR) for purchases if not paid by due date	AK, DE	5%
	GA	16%
	IL, MN	8%
	VA, WA, WV	12%
	PR	6%
	All other states	18%
Method of computing the balance for purchases	Adjusted Balance – Finance Charge is only imposed on past due amounts.	

The information about the costs of the Account described above is accurate as of December 2008. This information may have changed after that date. To find out what may have changed, write to us at P. O. Box 25488, Charlotte, NC 28229-5488. If your application is approved, the full terms of the Agreement: (a) will be sent to you with your card, (b) will be governed by federal and North Carolina law and (c) may be changed by us as provided in the agreement.