



PO Box 247 • Allentown, New Jersey 08501

Phone: 609.259.8585 • Fax: 609.259.6044

Application for Credit

Please allow 4-6 weeks for processing

Legal Name & DBA: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Shipping Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Fax: _____

Email: _____

Date Business established: _____

Federal Tax ID#: _____

(Please Check One)

Corporation

Partnership

Proprietorship

Individual

LLC

Business Type: _____

Are your purchases
Taxable? Yes No

Yes No

Tax Exempt #

If exempt please include tax exempt form

Names of Principals/Owners

Title

Phone

1. _____

2. _____

Amount of Credit Requested: _____

Accounts Payable Contact Person: _____

Phone: _____

Fax: _____

Do You require PO's? Yes No

Annual Sales: _____

Name of Bank: _____

Account #: _____

Address: _____

Bank Contact: _____

Contact Phone #: _____

Fax #/Email: _____

Industry Trade References (Name, Address, Contact, Phone, Fax)

1. _____

Contact: _____

Phone: _____

Fax/Email: _____

2. _____

Contact: _____

Phone: _____

Fax/Email: _____

3. _____

Contact: _____

Phone: _____

Fax/Email: _____



PO Box 247 • Allentown, New Jersey 08501

Terms: Net 30 days from date of invoice. 1.5% per month finance charge will be charged on all past due balances. Failure to pay finance charge can result in loss of credit. Applicant agrees to pay any and all collection fees incurred to collect any outstanding balance, including attorney's fees and costs. We reserve the right to terminate this agreement at any time.

The undersigned authorizes Pleasant Run Nursery, Inc. to collect credit information from trade references above.

The undersigned authorizes his/her bank to release necessary account information for credit worthiness verification.

I personally guarantee the payment of any obligation due to Pleasant Run Nursery, Inc., by extension of the credit requested in this application. Further, I have read this entire document, understand its terms and conditions, and agree to be bound by its provisions. In dispute this document will be covered by the laws of the State of New Jersey.

(Signature of Guarantor)
(Must be an owner, partner, member or corporate officer)

(Position)

(Date of Application)

(Printed Name)