



APPLICATION FOR CREDIT

Waverly Farm

1931 Greenfield Road
Adamstown, Maryland 21710

301-874-8300 301-874-8302 (fax) info@waverlyfarm.com

PLEASE PRINT OR TYPE ALL INFORMATION EXCEPT SIGNATURES

THE EXECUTION OF THIS APPLICATION FORMS A CONTRACT BETWEEN THE COMPANY AND INDIVIDUAL MAKING APPLICATION AND WAVERLY FARM, LC. THE APPLICATION WILL BE RETURNED IF NOT PROPERLY FILED OUT.

LEGAL BUSINESS NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

COUNTY _____ YEAR ESTABLISHED _____ YEARS AT ADDRESS _____

ACCOUNTS PAYABLE CONTACT _____

TELEPHONE _____ FAX _____ EMAIL _____

TYPE OF ORGANIZATION

() CORPORATION () 'C' () 'S' () LLC

SALES TAX STATUS (MARYLAND BUSINESSES ONLY)

() TAXABLE () EXEMPT

RESALE CERTIFICATE NUMBER _____

OWNERS AND OFFICERS OF THE COMPANY

NAME _____ TITLE _____

NAME _____ TITLE _____

NAME _____ TITLE _____

BANK REFERENCE

BANK _____ TELEPHONE _____

ADDRESS _____

TYPE OF ACCOUNT _____ ACCOUNT NUMBER _____

TRADE REFERENCES (MUST BE NURSERIES)

COMPANY NAME _____ TELEPHONE _____

ADDRESS _____ FAX _____

COMPANY NAME _____ TELEPHONE _____

ADDRESS _____ FAX _____

COMPANY NAME _____ TELEPHONE _____

ADDRESS _____ FAX _____

I (AS REPRESENTATIVE OF THE APPLICANT AND INDIVIDUALLY) HEREBY CERTIFY THE FOREGOING TO BE TRUE. I FURTHER AGREE TO PAY ALL CHARGES WHEN DUE AND TO PAY A SERVICE CHARGE OF 1.5% PER MONTH (18% ANNUALLY) FOR ALL AMOUNTS PAST DUE 30 DAYS OR MORE. I AGREE THAT, SHOULD IT BE NECESSARY TO BRING SUIT OR THIRD PARTY COLLECTION ACTION AGAINST THE APPLICANT TO COLLECT PAST DUE AMOUNTS, SUCH SUIT SHALL BE MADE IN FREDERICK COUNTY, MARYLAND AND ALL COSTS OF SUCH SUIT OR COLLECTION ACTION, INCLUDING ATTORNEY FEES AND COURT COSTS AND INTEREST AT THE RATE OF 1.5% PER MONTH ON ALL AMOUNTS FOUND TO BE DUE AND PAYABLE, SHALL BECOME PART OF THE TOTAL THEN DUE.

SIGNATURE _____ TITLE _____ DATE _____

(MUST BE OWNER OR OFFICER OF THE APPLICANT)

PRINT NAME _____