

## **New Customer Application**

Waverly Farm

P: (301) 874-8300 F: (301) 874-8302

1931 Greenfield Rd Adamstown, MD 21710

acct: tiffany@waverlyfarm.com

## THE APPLICATION WILL BE RETURNED IF NOT PROPERLY AND COMPLETELY FILLED OUT

 $Please\ print\ or\ type\ all\ information\ except\ signatures$ 

Legal Business Name			
Address			
City	State	<u> </u>	Zip
Type of Organization:Corporation	'C'`S'	_ LLC	
Year Established	Years at Address		
Sales Tax Status (MD Businesses Only) resale certification #			
Accts Payable Contact		email:	
phone:	fax:		
Purchasing Contact			
phone:			
Owners and Officers of the Co			
Name	7. 7.	Title	
	Title		
Name			
Bank Reference			
Bank		phone	
Address			
Type of Account			
Trade References - must be ni	urseries		
Company Name		phone	
	email/fax		
Company Name		phone	
Address		email/f	fax
Company Name	phone		
Address		email/f	fax
THE EXECUTION OF THIS APPLICATION FOR MAKING APPLICATION AND WAVERLY FARM		TWEEN THE COMP	ANY AND INDIVIDULAL
I (as representative of the applicant and individually and to pay a service charge of 1.5% per month (18% sary to bring suit or third party collection action ag County, MD and all costs of such suit or collection month on all amounts found to be due and payable	6 annually) for all amous ainst the applicant to co- action, including attorne	nts past due 30 days o llect past due amount ey fees and court cost	r more. I agree that, should it be neces- s, such suit shall be made in Frederick
Signature (Must be owner or officer of the applican		Title	Date
(Must be owner or officer of the applican	nt)		
Print Name			