

CREDIT APPLICATION / AGREEMENT

(Both sides must be completed in full to process)

Date	Salesperson				
Trade Name					
Billing Address			City		
State Zip	Phone ()	Fax ()	
Billing Email		Cont	act		
Company Type: (check one)	Sole	Partnership	Corpo	ration	LLC
How Long In Business	_ Own Property	: Yes or No	Credit Requ	uested \$	/Month
Federal Identification #(If yes, attach state exemption	form. By law a Res	Stateseller or Lawn Care Ap	Tax Execution Tax Executio	empt: : (Ci oly for exe	rcle one) Yes or No emptions)
Pesticide Applicator License # (Include copy)		Name		Expira	ation Date
Bank Name		Acct #			
Address	City		State		Zip
Bank Phone ()	Contact		Email		
Current Trade References:					
1) Name		Email			
Contact	Fax ()_		Phone ()_	
Address		City		State	Zip
2) Name		Email			
Contact	Fax ()_		Phone () _	
Address		City		State	Zip
3) Name		Email			
Contact	Fax ()_		Phone ()_	
Address	(City		State	Zip Zip

CREDIT APPLICATION / AGREEMENT (Cont.)

- I. A service charge (1.5% per month) will be applied to all invoices unpaid after the 30 day terms stated. This equals an annual percentage rate of 18% and I/we agree to pay such charges.
- II. If Reed & Perrine Sales, Inc., at their sole discretion refers your account to an attorney for the purpose of collection, you will pay Reed & Perrine's actual court costs and attorney fees equal to 33.34% of the total outstanding balance. I agree that this is a reasonable amount of attorney fees.
- III. I/we agree that this contract shall be governed by New Jersey Law.
- IV. In the event that goods are returned, with prior approval, I/we agree to pay a 10% restocking charge. Anchor products are charged a 25% restocking charge with prior approval.
- V. In the event that a check is returned, I/we agree to pay a service charge.
- VI. This is a continuing personal guarantee which remains in effect even if the business entity is sold unless the guarantor notifies Reed & Perrine Sales, Inc. by certified mail of your intention to no longer guarantee the debts of the entity. In this event Reed & Perrine Sales, Inc. reserves the right to cease providing credit to the entity. Furthermore should an employee that has the privilege of charging on your Reed & Perrine Sales, Inc. account be terminated or their status has changed you must notify Reed & Perrine Sales, Inc in writing of any changes or you will be liable for any charges incurred on your account.

I/we certify that I/we are principal(s) in the business listed herein and own or control at least fifty (50%) percent interest in said business. In consideration of the extension of credit; I/we agree to personally guarantee payment of all my accounts balances including interest and attorney fees. I/we waive any requirement that I/we be notified of any default by the buyer. This shall be a continuing personal guarantee and shall not be affected by any extension of time or modifications to this agreement with or without my/our consent:

Personal Name(s)							
Orivers License #	attach copy)	Issuing State					
`	,	Card Issuer		Exp Date			
SS#	Home Phone ()	Cell ()			
lome Address		City		State			
Bank Name		Acct #					
Street Address		City		State			
Contact	Email		Phon	e			
questions about your credit or Print Full Name	•	-	agreed to all the	terms nerein.			
Signature(I	Principal, Owner or Officer)		Date				
	DO NOT WRITE BEL	OW THIS LINE - FOR OF	FICE USE ONL	Y			
Credit Approved:	Yes No	Credit Li	mit:				
Acct # Assigned: _		Classifica	Classification:				
Date Approved:		_ Approve	d By:				