



"the plant people"

## CREDIT APPLICATION / TERMS AGREEMENT

P.O. Box 922 • McMinnville, TN 37111  
931.934.2868 • 800.557.5522 • Fx 931.934.2844

SALESMAN / BROKER NAME: \_\_\_\_\_

BUSINESS CONTACT INFORMATION			
Company name:		<input type="checkbox"/> Sole proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation	
Address:		Please list all Officers / Partners / Proprietors:	
City, State, Zip			
Phone:			
Fax:			
SALES TAX ID:			
Primary Contact Name:		<b>EMAIL(S) TO BE USED FOR:</b>	1) Order Acks.:
Primary Email:			2) Invoices:

BUSINESS AND CREDIT INFORMATION			
Date business commenced	How long at current address?	<input type="checkbox"/> Lease / Rent <input type="checkbox"/> Owned	
_____	_____ Yrs.    _____ Mo.	Annual Sales Approx. \$ _____	
Bank name:		Phone:	
Address:		Account number:	
City, State, Zip:		Type of account:	

BUSINESS/TRADE REFERENCES			
Company name		Phone	
Address		Fax	
City, State ZIP Code		Type of account	
Company name		Phone	
Address		Fax	
City, State ZIP Code		Type of account	
Company name		Phone	
Address		Fax	
City, State ZIP Code		Type of account	
Company name		Phone	
Address		Fax	
City, State ZIP Code		Type of account	
Company name		Phone	
Address		Fax	
City, State ZIP Code		Type of account	

### AGREEMENT

- All invoices are to be paid 30 days from the date of the invoice. By signing below, you acknowledge and agree to pay a service charge of 1 ½% per month, or the amount allowed by law in your state, on all overdue accounts. You further acknowledge and agree that in the event that it becomes necessary for Botanico, Inc. to file suit to enforce payment, that such suit may be brought in Warren County, TN at the seller's option and seller shall be entitled to court costs, attorney's fees and interest at the maximum rate allowed on all amounts found to be due and payable.
- By signing this application, you hereby authorize Botanico, Inc. to make inquiries into all banking and business/trade reference information supplied.
- By signing this application, you further authorize the release of pertinent banking and business/trade reference information to Botanico, Inc.

SIGNATURE			
As a Corporation officer, partner or proprietor, I hereby certify the above information is true and accurate to the best of my knowledge and agree to abide by the terms set forth herein.			
Signature:		Print Name:	
Date:		Title:	