Carolina Native Nursery <u>APPLICATION FOR CREDIT</u>

(Fax) 828-682-1303 (Office)828-682-1471 sales @carolinanativenursery.com

Business Name:			
Mailing Address:			
Street Address (if different): _			
Telephone:	lephone: Fax:		
Resale No	Years in Business:	Years in Business:	
Complete one:			
Corporation – Officers	s:		
Partnership – Partner	s:		
Proprietor:		SS#	
Bank:			
Bank Street Address:	C	City, State, Zip:	
Contact Person:		Phone #:	
Nursery Name	Contact	Phone and fax #	
for terms of sale, and to determine application can be processed. For	a line of credit with Carolina Na your protection as well as ours, y	tion will be used for the express purpose of qualifying the applicantive Nursery, LLC. The greater your cooperation, the quicker your signature is required (line 2 below). and assume personal responsibility for debts incurred in the name	
Name:		Date:	
overdue accounts. Should it become	ne necessary to file suit to enforced the seller will be entitled to col	£ 1.5% per month or the amount owed by law in your state on all e payment, applicant agrees that suit will be filed in Burnsville, lect from applicant court costs, attorney fees, and interest at the	
Agreement : I hereby certify terms set forth herein.	the foregoing to be true to	the best of my knowledge and agree to abide by the	
Signature (Line2):		Date:	