

ARBOR FIELDS

CREDIT APPLICATION

AMOUNT OF CREDIT LINE REQUESTED: \$ _____

PERSON TO SPEAK WITH CONCERNING PAYMENTS: _____

DATE: _____

COMPANY: _____

BILLING ADDRESS: _____

SHIPPING ADDRESS: _____

OFFICE #: _____ MOBILE#: _____ FAX#: _____

CORPORATION: _____ PARTNERSHIP: _____ INDIVIDUAL: _____

THE PRINCIPAL OWNERS OR OFFICERS ARE:

NAME: _____ POSITION: _____

HOME ADDRESS: _____ PHONE: _____

_____ S.S.#: _____

NAME: _____ POSITION: _____

HOME ADDRESS: _____ PHONE: _____

_____ S.S.#: _____

NAME: _____ POSITION: _____

HOME ADDRESS: _____ PHONE: _____

_____ S.S.#: _____

BANK REFERENCE

NAME OF BANK: _____

ADDRESS: _____

PHONE: _____ FAX: _____

ACCOUNT#: (CHECKING) _____

CONTACT PERSON: _____

TRADE REFERENCES

NAME: _____ CONTACT: _____

ADDRESS: _____

PHONE: _____ FAX: _____

ACCOUNT#: _____ CREDIT LINE: _____

NAME: _____ CONTACT: _____

ADDRESS: _____

PHONE: _____ FAX: _____

ACCOUNT#: _____ CREDIT LINE: _____

NAME: _____ CONTACT: _____

ADDRESS: _____

PHONE: _____ FAX: _____

ACCOUNT#: _____ CREDIT LINE: _____

FEDERAL ID#: _____ STATE ID#: _____

DATE BUSINESS BEGAN: _____

I AGREE TO COMPLY WITH THE CREDIT TERMS OF ARBOR FIELDS AND THE CONDITIONS OF SALE AND WILL PAY ANY AND ALL PENALTY CHARGES ON PAST DUE AMOUNTS. I REALIZE THESE CHARGES ARE A PENALTY FOR LATE PAYMENT AN NOT AN OFFER OF FINANCING. I GUARANTEE FULL AND PROMPT PAYMENT OF ALL INVOICES. IN THE EVENT ATTORNEY FEES OR OTHER COLLECTION FEES ARE INCURRED, I AGREE TO PAY SAID FEES. I HEREBY GRANT PERMISSION TO THE BANK AND TRADE REFERENCES ABOVE TO RELEASE INFORMATION TO ARBOR FIELDS TO ESTABLISH CREDIT.

PRINT NAME: _____ SIGNATURE: _____ TITLE: _____ DATE: _____