



APPLICATION FOR CREDIT

Name of Business : _____ Years in Business _____
 Address (Street Address): _____
 Mailing Address : _____
 City : _____ State : _____ Zip Code : _____
 Business Phone : (____) _____ Business Fax : (____) _____
 Type of Business : (1) Individual _____ (2) Partnership : _____ (3) Corporation : _____
 (4) Wholesale _____ (5) Retail : _____
 If Incorporated, State and Date of Incorporation : _____
 Resale Tax Number : _____

Owner, Partnership or Corporate Officers (Please print clearly)

I / We authorize Simpson's Greens and Floral Distributors, Inc. to investigate the business owners, partners or corporate officers' credit, including requesting a credit report from any credit reporting agency.

Name : _____ Title : _____ Home Phone (____) _____
 Home Address : _____
 Signature : _____
 Name : _____ Title : _____ Home Phone (____) _____
 Home Address : _____
 Signature : _____

If owner or partnership, Do you own _____ or Rent _____ your business facility ?
 If renting, from whom do you rent ? _____
 Address _____ Phone (____) _____

Banking Information

I/We authorize the below referenced bank to release information pertaining to the following account(s).

Name : _____ Address : _____ Phone : (____) _____
 Checking Account # _____ Bank Officer : _____
 Signature : _____

Floral Industry References

Name : _____ City & State : _____ Phone/Fax : (____) _____
 Name : _____ City & State : _____ Phone/Fax : (____) _____
 Name : _____ City & State : _____ Phone/Fax : (____) _____

Important : Please complete both pages of this application and return to Simpson's Greens and Floral Distributors Inc. Any omissions in this application may delay the decision to open your account. All information contained in this application will be held in the strictest of confidence and will used only by Simpson's Greens and Floral Distributors, Inc.



Terms of Sale

Terms of Sale : Net 30 EOM. A finance charge of 1 1/2 % per month (Annual Percentage Rate is 18%) will be added to past due amounts.

I understand and agree to the terms of sale. If, in the event that Simpson's Greens and Floral Distributors, Inc. deems it necessary to place my account in the hands of an attorney for collection of any past due amounts, I agree to pay reasonable court costs and attorney's fees.

Name of Firm _____
Print Name _____
Signature _____
Title _____

Individual Personal Guaranty

For and in consideration of Simpson's Greens and Floral Distributors, Inc. extending credit at the undersigned request to _____ (hereafter referred to as "Company"), the undersigned (whether one or more) jointly, severally, and unconditionally guarantees full and punctual payment when due of all of all indebtedness now or hereafter owing by said Company, and personally guarantees the Company fails to pay the same. This guaranty additionally binds the undersigned to pay any attorney's fees and/or court costs assessed by a Court or paid by Simpson's Greens and Floral Distributors, Inc. should the account be placed with an attorney for collections.

In the event of the Company's default, the undersigned waive notice of Simpson's Greens and Floral Distributors, Inc. acceptance, renewal, and extension of the indebtedness.

I/we further authorize Simpson's Greens and Floral Distributors, Inc. to investigate the undersigned personal credit, including requesting a credit report from any credit reporting agency.

Executed this _____ Day of _____, 20_____ .

Address _____ Signature _____
_____ Print Name _____
Address _____ Signature _____
_____ Print Name _____