

Acct # _____

Date _____

Salesman _____

Credit Application/Agreement

Business Information

Company/ DBA _____ Fed ID# _____

Contact Name _____ Phone _____

Email: _____ Mobile _____

Registered Company Address _____

Mailing Address if different _____

Year Established _____ Own Property _____ Company Type _____

Tax Exempt _____ State _____ PA residents - select if applicable

Applicable Sales Tax Exemption form must be received. By NJ law only Resale and Lawn Care Applicators may apply for exemptions.

Billing Contact _____ Phone # _____

Billing Email : _____

Licensing - Must Include Copy

Pesticide Applicator License # _____ State _____ Exp _____

OR

Dealers License # _____ State _____ Exp _____

Primary Shipping Information (Ship-To)

Street Address:	Choose One :	Van	Flatbed
City	Have Loading Dock :	Yes	No
	Need Piggyback:	Yes	No
	Have Fork Lift :	Yes	No
	Have Pallet Jack :	Yes	No
State	Zip		
Shipping Contact :	Truck Requirements		
Mobile No.	Tractor Trailer (68 ft.)	Yes	No
Other No.	Rack (42 ft.)	Yes	No
Receiving Hours :	Box Truck (37 ft.)	Yes	No
Additonal Info :			

Bank Reference Information

Bank _____ Account # _____

Bank address _____

Banker _____ Phone _____

Email _____

Business/Trade References Information

Applications will not be processed without 3 complete references.

Company Name _____	Contact _____
Address _____	Phone _____
City, State, Zip _____	Email _____
Type of Account _____	Fax # _____

Company Name _____	Contact _____
Address _____	Phone _____
City, State, Zip _____	Email _____
Type of Account _____	Fax # _____

Company Name _____	Contact _____
Address _____	Phone _____
City, State, Zip _____	Email _____
Type of Account _____	Fax # _____

- I. A service charge of (1.5% per month) will be applied to all past due invoices 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 and we consent to jurisdiction of all disputes in the Superior Court of NJ, Monmouth County Law Division.
- 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 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 Reed & Perrine. 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) _____

Drivers License _____ State _____

(Must Attach Copy)

SSN _____ Home No. _____ Cell _____

Home Address _____ City _____ State _____

Everything that I have stated in this application is correct to the best of my knowledge. I understand that you will retain this application whether or not it is approved. You are authorized to check my credit, bank references and employment history to answer any questions about a credit experience with me. The undersigned has read and agreed to all the terms herein:

Print Full Name _____

Signature _____ Date _____

Print, Sign and Return via : Fax 732-446-1344 OR Email : office@reedandperrine.com

For Office Use Only

Credit Approved _____	Acct # _____
Date Approved _____	Credit Limit _____
Approved By _____	Classification _____
Salesman _____	Terms _____