

Kankakee Nursery Company

P.O. Box 288 - Aroma Park, IL 60910 - Phone: 815-614-5568 - Fax: 815-937-9389
amy@kankakeenursery.com

Application For Credit

Legal Name of Business _____

Mailing Address _____

Street City State Zip

Phone () _____ Fax () _____

e-mail address (for receiving invoices) _____

Principal's Name _____ Res. Phone () _____

Address _____

Street City State Zip

Proprietors _____ Partnership _____ Corporation _____

If limited company or partnership list names and addresses of partners, if corporation list officers and directors and their residence addresses.

<u>Name</u>	<u>Address</u>	<u>Phone</u>
_____	_____	_____
_____	_____	_____

Name of Bank _____ Contact _____

Address _____ Phone _____

_____ Fax/email _____

1ST ORDER WILL BE COD FOR ALL NEW CUSTOMERS

Credit References: (Please Give Other Nurseries If Possible)

Company Name _____ Address (Please give Full Address) _____

1. _____

Phone () _____ Fax () _____ email: _____

2. _____

Phone () _____ Fax () _____ email: _____

3. _____

Phone () _____ Fax () _____ email: _____

4. _____

Phone () _____ Fax () _____ email: _____

I / We Request a monthly credit account in the sum stated above and agree to abide by your term of trade as published in your trade list or catalog. I / We agree to pay interest on any overdue invoices at the rate of 1% per month. Purchaser agrees to pay all collection including court cost and attorney's fee in case suit or action is commenced to collect all or any part of amount due.

Date

Signature of Owner or Authorized Rep

Title