

Credit Application

North Carolina Farms, Inc • 4205 Forest Drive • Indian Trail, NC 28079 • www.ncfarmsinc.com • phone: 800.436.6248 • fax: 704.289.6312

Your Company Info:

Business Name: _____ Type of Business: _____
Address: _____ Date Established: _____
City/State: _____ Zip: _____ Total Years in Business: _____
Telephone: _____ Fax: _____ Does state, county, or city require a License? Yes
E-mail Address: _____ No
Federal Tax ID: _____ If yes, License # _____

Ownership: Sole Owner Partnership Corporation

Principal: _____
Full Name Title
Principal: _____
Full Name Title
Principal: _____
Full Name Title
Principal: _____
Full Name Title

Number of Employees : _____

Line of Credit Requested: \$ _____ Present Balance: \$ _____

Trade References: (Name suppliers of major products and services.)

Name Phone

Bank References:

Checking Savings

Bank Name Account # Contact Person

Bank Name Account # Contact Person

Est. Annual Sales: \$ _____ Has the firm of any of its principals ever been bankrupt? Yes
If yes, explain in comments section. No

Additional Comments:

*As an inducement to grant credit, the above named warrents that the information submitted is true and correct. I hereby give North Carolina Farms, Inc authorization to investigate the credit references listed. I give my personal guarantee to make payment, when due, of all my accounts with North Carolina Farms, Inc. Accounts that have to be placed with an attorney for collection will be subject to the laws of the state of North Carolina. Court juristiction shall be in Union County, NC.

Signature: _____ Date: _____