



NORTH CAROLINA FARMS, INC

CREDIT APPLICATION FOR A BUSINESS ACCOUNT



BUSINESS CONTACT INFORMATION

Title:			
Company name:			
Phone:	Fax:	E-mail:	
Registered company address:			
City:		State:	ZIP Code:
Date business commenced:			
Sole proprietorship:	Partnership:	Corporation:	Other:

BUSINESS AND CREDIT INFORMATION

Primary business address:			
City:		State:	ZIP Code:
Have you done business with us before?		How long?	
Telephone:	Fax:	E-mail:	
Bank name:			
Bank address:		Phone:	
City:		State:	ZIP Code:
Type of account	Account number		
Savings			
Checking			
Other			

BUSINESS/TRADE REFERENCES (MUST HAVE NATIONALLY KNOWN SEED COMPANIES, BROKERS, ETC.)

Company name:			
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
Type of account:			
Company name:			
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
Type of account:			
Company name:			
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
Type of account:			

AGREEMENT

1. I have read and am in agreement with the terms of service and return policy as published on ncfarmsinc.com.
2. As inducement to grant credit, the above named warrants 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 guarantee to make payment, when due, of all my account with NORTH CAROLINA FARMS. Accounts that have to be placed with an attorney for collection will be subject to the laws of North Carolina. Court jurisdiction shall be in Union County, NC.

SIGNATURES

Title:	Title:
Date:	Date: