THE TANKARD NURSERIES

CREDIT APPLICATION
P.O. BOX 649
EXMORE, VA 23350
PHONE: 757, 442, 6112

EXMORE, VA 23350 PHONE: 757-442-6112 FAX: 757-442-5372



PLEASE TYPE OR PRINT CLEARLY

| COMPANY NAME: | | | | | | | | |
|--------------------|------------|-------------|----------|------------|-------------|-------------|------------|--|
| BILLING ADDRESS: | Street | | | | | | | |
| City | | | State | | Zip | | Phone | |
| SHIPPING ADDRESS: | Street | | | | | | | |
| City | | | State | | Zip | | Phone | |
| EMAIL ADDRESS: | | | | | | | | |
| EMPLOYER ID# | | S | ГАТЕ ТА | X# | | | TAX EXEMPT | |
| WILL YOU USE A PUF | RCHASE C | RDER SYSTE | M? | | | | | |
| AUTHORIZED EMPLO | YESS TO | PURCHASE O | R SIGN F | FOR MERCH | IANDISE: | | | |
| IS YOUR BUSINESS A | : | Corporation | | Sole Prop. | | Partnership | | |
| IF A CORPORATION: | President | | | | V. Presiden | ıt | | |
| | Secretary | | | | Treasurer | | | |
| PERSONAL GUARAN | ΓEE / OFFI | | | | | | | |
| IF A SOLE PROP.: | Owner | | | | | | | |
| IF A PARTNERSHIP: | Partners | | | | | | | |
| | Limited | | | | General | | | |
| BANK AFFILIATION | | | | | | Contact | | |
| BANK ADDRESS: | | | | | | | | |
| City | | | State | | Zip | | Phone | |
| Account Number(s) | | | | | | _Fax Number | | |

| 1. Company Name | :: | Phone |
|---------------------------------|---|---|
| Address: | | Fax |
| City | State Zip | |
| 2. Company Namo | :: | Phone |
| Address: | | Fax |
| City | State Zip | |
| 3.Company Name | · | Phone |
| Address: | | Fax |
| City | State Zip | |
| The undersigned tion and author | re 30 days from date of invoice. Outstanding balances and authorizes and releases all banks, persons, and comparizes the checking of credit. The undersigned agrees to parounts are delinquent. | nies listed on this application to furnish informa- |
| Date: | Signature | |

BUSINESS REFERENCES:

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Terms and Conditions of Sale

Terms:

Tankard Nurseries currently accepts two forms of payment which are COD or Net 30. COD is credit card only. We accept Visa, MasterCard and American Express. Credit terms may be established by submitting a signed credit application (attached) with bank and trade references. Customers with an established good payment history will be extended terms of Net 30 days from date of invoice. Finance charges of 1.5% per month (18% per year) will be applied to and collected on all accounts over 30 days.

Conditions:

All plants are guaranteed to be true to name and reasonably free of all injurious pests and diseases. Because of environmental and planting conditions beyond our control, we can give no warranty to the continued life of any plant.

Claims:

All claims, including short counts are to be marked on the bill of lading, verified, and signed for by the truck driver at time of delivery. Damage claims must be phoned in at the time of delivery or sent in writing within 10 days in order to be considered. All disputes shall be settled under VA State law and venue of dispute shall be Eastville, VA.

| I HAVE READ | AND AGREE TO THE ABOVE: | |
|-------------|-------------------------|--------------------------------------|
| Date: | Signature: | (Same name as on credit application) |