## **West Coast Turf Credit Application**



Business Name:							
Physical Address:							
Mailing Address:							
Mailing City:		State:	Zip:				
AP Contact Name:		AP Contact Email:					
AP Phone:		AP Fax:					
How long in business under present ownership?		Prior Corporate Name/DBA:					
Federal Tax ID #:		Resale Tax Exemption Certificate #:					
Contractor's License #:		Resale Certificate Expiration: State Issued:		State Issued:			
Where did you hear of us?:		Requested Credit Limit:					
Trade References*	Account ID	Cre	edit Dept Phone	Email Address			
*At least 3 trade references required. Please inquire beforehand if references are able to provide credit references							
Corporations: Please complete this box							
President:		CFO:					
State of Incorporation:		Date of Incorporation:					
Bank Reference:	Branch	Phone:	Contact:	Account #:			

I/We hereby authorize your investigation through above references, Credit Bureau or other investigative agency as to my/ our credit and financial responsibility. I/We understand that an account with you is due and payable within 30 days from the date of invoice, and if not paid the open account may be discontinued.

It is understood that if the account is not paid within 30 days from the date of invoice it becomes past due, and interest at the rate of 1% per month, or 12% annually will be calculated on the full invoice amount each month until fully paid.

In the event it becomes necessary for West Coast Turf to incur any collection costs or suits to collect under this agreement, the undersigned promises to pay such additional costs of collection and such sums as the court may adjudge reasonable as Attorney's fees on said suit.

Printed Name of App	olicant:	Applicant Signat	rure:		
Title:		Date:			
	Persona	I Guarantee			
I hereby pers	ion of West Coast Turf extending credit to onally guarantee any and all amounts owed becomes necessary for West Coast Turf to ned promises to pay such additional costs o	incur any collecti	on costs or suits to collect this agreement,		
Print Name:		Signature :			
Office Use Only					
Salesperson:					
Customer Type:					
Credit Limit:					
Approved by:		Date	:		

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Please complete both pages and email to <a href="mailto:accountsreceivable@westcoastturf.com">accountsreceivable@westcoastturf.com</a>