



Natorp Landscape Supply
 8601 Snider Rd.
 Mason, Ohio 45040
 (513) 398-4769 press 2
 1-888-628-6777
 www.nlsupply.com

CREDIT APPLICATION AND ACCOUNT AGREEMENT

Application Date _____

For the purpose of establishing credit and to indicate agreement as to terms of future purchases, the undersigned represents:

Section One	Legal Business Name _____	Business Phone () _____
	DBA or Trade Style _____	FAX () _____
	Street Address _____	# of Locations _____ # of Employees _____
	Mailing Address _____ PO Box Number _____	Estimated annual Sales \$ _____
	City/State _____ Zip Code _____	Year Business Organized _____ <i>(under current ownership)</i>
	Email Address _____	
	State Resale Tax Exempt Number _____ Issuing State _____	Type _____
	<i>(if tax-exempt, please complete and return attached tax-exemption form)</i>	Purchase Order # received on orders? __yes __no
	Nursery Dealer's License Number _____	Acct. Payable Name _____
	___ Own ___ Rent ___ Lease Term of Lease _____	Acct. Payable Phone _____

TYPE OF BUSINESS

___ Garden Center ___ Landscaper ___ Re wholesaler ___ Other _____
___ Individual ___ Partnership ___ Corporation ___ Limited Liability Partnership (LLP) ___ Limited Liability Corporation (LLC)
Social Security Number (if individual) or Federal ID Number (Partnership, Corporation, LLP or LLC) _____ State Of Incorp. _____

INDIVIDUAL/PARTNERS/OFFICERS/GUARANTORS/MEMBERS

Section Two	Name _____	Name _____	Name _____
	Title _____	Title _____	Title _____
	Home Address _____	Home Address _____	Home Address _____
	City _____ ST _____ Zip _____	City _____ ST _____ Zip _____	City _____ ST _____ Zip _____
	Telephone () _____	Telephone () _____	Telephone () _____
	Social Security No. _____	Social Security No. _____	Social Security No. _____

TRADE REFERENCES – Names of major GREENGOODS suppliers

Section Three	Name _____	Name _____	Name _____
	Mailing Address _____	Mailing Address _____	Mailing Address _____
	City _____ ST _____ Zip _____	City _____ ST _____ Zip _____	City _____ ST _____ Zip _____
	Telephone () _____	Telephone () _____	Telephone () _____
	Fax No. () _____	Fax No. () _____	Fax No. () _____

BANK CREDIT REFERENCES

Bank _____ Telephone () _____
Branch Address _____ City _____ State _____ Zip _____
Checking Account No. _____ Loan Account No. _____

REVERSE SIDE MUST BE COMPLETED

TERMS AND CONDITIONS OF SALE

Table with 2 columns: Category (Payment, Shipment, Sales Tax, Price, Warranty, Claims) and Description. Payment: Late payment charges of 1 1/2% per month... All returned checks will be subject to a \$20 fee. Shipment: Shipments will not be made to customers with overdue accounts. Sales Tax: For all purchases, we must have a State or Federal Sales Tax Exemption Certificate... Price: All prices are F.O.B. Natorp location. Warranty: Wm. A. Natorp Inc. will exercise care to have all plants, true to size and name. Claims: All claims for errors or unsatisfactory stock must be reported upon receipt...

The undersigned Applicant represents and warrants that the information given on the reverse side is given for the purpose of obtaining credit and is true and correct. The Applicant's signature also attests financial responsibility, ability and willingness to pay all invoices in accordance with the above "Terms and Conditions for Sale" unless expressly agreed to in writing.

In the event of default in payment of any amount due including finance charges, Applicant and Guarantor(s) agree that such suit may be brought in Warren County, Ohio or Seller's option. Seller shall be entitled to all reasonable costs of collection, including agency and attorney's fees of at least 25% of the unpaid balance, and court costs plus interest at 18% per annum or the highest rate allowed by law, whichever is greater, incurred and permitted by laws governing these transactions shall be the obligation of and paid by the Applicant.

These Terms and Conditions of Sale represent the entire Agreement between you and Wm. A. Natorp Company, they superseded any and all prior agreements or understandings, whether oral or written between you and Wm. A. Natorp Company regarding the subject matter of Agreement. Any modification alteration, or amendment of the Agreement shall be effective only if in writing and signed by a duly authorized representative of Wm. A. Natorp Company. In the absence of an original copy of this application, a faxed copy will be considered the original for purposed of this agreement.

Natorp's is authorized to request financial/credit information.

Firm Name: _____

AGREEMENT will not be accepted for processing without a valid officer's signature and date where required.

By [Signature] _____
Signature Home Address Date
Print Name

By [Signature] _____
Signature of Spouse (if individual business) Home Address Date
Print Name

For consideration of extending credit to the above named Applicant. I hereby agree to be personally responsible for all indebtedness or liabilities incurred in the name of the Applicant without qualification or limitation. This is a continuing personal guarantee and shall continue so long as credit is extended. This guarantee may only be terminated by written notice to seller's Credit Department sent by Certified Mail or with Signed Acknowledgment of Receipt. I further agree to pay all expenses incurred in enforcing this guaranty, including the payment of all agency, reasonable attorney's fees and court costs. The undersigned waives notice of default, diligence, resort to security, joinder of applicant, obligation to proceed first against applicant, any claims, rights or remedies against applicant based on this guarantee, or notice of change in credit terms or credit lines. The Undersigned personal guarantor, recognizing that his or her individual credit history may be a necessary factor in the evaluation of this personal guarantee, hereby consents to and authorizes the use of a consumer credit report on the undersigned individual(s) from time to time as may be needed, in the credit evaluation process.

By [Signature] _____
Signature Home Address Date
Print Name

By [Signature] _____
Signature of Spouse (if individual business) Home Address Date