



Valley Farms Supply

CREDIT APPLICATION & AGREEMENT

COMPANY NAME:

DATE:

MAILING ADDRESS:

CITY:

STATE:

ZIP:

SHIPPING ADDRESS:

CITY:

STATE:

ZIP:

EMAIL ADDRESS:

TELEPHONE: ()

FAX: ()

*SALES TAX EXEMPT: YES OR NO Federal ID # _____

If you answered yes, please attach a copy of the certificate and indicate number above

OWNERSHIP: () INDIVIDUAL () PARTNERSHIP () CORPORATION () LLC () OTHER: _____

FULL NAME OF OWNER(S) OR OFFICERS ("PRINCIPALS"):

| NAME | | TITLE | SOCIAL SECURITY NUMBER | | |
|-------------------------------|--------|---------------------------------|------------------------|-------|--|
| | | | | | |
| | | | | | |
| ACCOUNTS PAYABLE CONTACT | | DELIVERY OF INVOICES/STATEMENTS | | | |
| NAME: | FAX: | __EMAIL | | __FAX | |
| PH: | EMAIL: | __MAIL | | | |
| <i>CHOOSE ONLY ONE METHOD</i> | | | | | |

DATE BUSINESS STARTED _____ ANNUAL SALES \$ _____

IF NEW BUSINESS, DESCRIBE PAST EMPLOYMENT (OR IF STILL EMPLOYED) _____

HAVE THERE BEEN ANY CHANGES IN OWNERSHIP IN THE LAST 5 YEARS? _____

DO YOU OWN OR RENT YOUR SPACE? _____ HAVE YOU EVER CLAIMED BANKRUPTCY? _____

ARE PURCHASE ORDERS REQUIRED? _____ ESTIMATED AMOUNT OF CREDIT NEEDED MONTHLY: _____

AUTHORIZED NAMES OF PURCHASERS _____

References

BANK REFERENCES

Business account with: _____

Bank Address and Telephone: _____

Account # and Contact person: _____

TRADE REFERENCES

Name: _____

Address: _____

Fax #: _____

Account#: _____

Name: _____

Address: _____

Fax #: _____

Account#: _____

Name: _____

Address: _____

Fax #: _____

Account#: _____

Name: _____

Address: _____

Fax #: _____

Account#: _____

****Trade references must be filled out in order to open an account****

TERMS: Applicant and the undersigned principal(s) represent that the information provided in this Credit Application and Agreement ("Agreement") is true and correct and is given to induce Valley Farms Supply, LLC (hereinafter "VFS") to extend credit to Applicant for commercial or business use only. Applicant authorizes VFS to make inquiry into any and all matters set forth in this Agreement and to obtain oral or written reports from any credit reporting agency or reference necessary for evaluation of Applicant's credit history, business relationships and financial status and responsibility.

Applicant agrees to pay VFS's invoices according to the payment terms stated on the invoices and to pay a time-price differential at a percentage rate of 1% annual of the total of the delinquent invoices when the invoices become past due. These charges are construed as time-price differentials and therefore these charges are not considered interest. We reserve the right to return your check within 90 days of cashing it and under no circumstances will a payment-in-full or in-full-settlement check be allowed except pursuant to a separate written agreement, assuming that the payment is less than the invoice and time-price differential amounts set forth on the statement. Otherwise, it will be presumed that the full-payment check was tendered in bad faith, and the check will not be accepted as full settlement on an account.

Any claims of errors or discrepancies in the billings must be submitted in writing to our office within 15 days of the billing statement date. Otherwise, all such objections are deemed waived and the account will become stated

Applicant agrees to pay all of VFS's costs of collection, including reasonable attorneys' fees, if Applicant's account is referred to an attorney for collection or if legal action is taken to collect. If at any time an invoice is past due, VFS will have the right, by notice, to accelerate and declare all account indebtedness of Applicant to VFS immediately due and payable in full, regardless of invoice terms. VFS will have the right, in its sole discretion, upon notice to Applicant, to change any term of credit offered to Applicant or to revoke further extension of credit to Applicant. Principals agree to the terms of this Agreement and hereby individually, unconditionally and jointly and severally guarantee payment to VFS of all amounts due or which hereafter become due, on Applicant's account with VFS. It is understood there is no contract until final approval from our home office located at 16713 Industrial Pkwy, Lansing, MI 48906 is granted. Such approval may be signified by the delivery of goods or pick up of goods, or services that may be ordered from time to time. Further it is agreed that any disputes arising between the parties will be determined by the law of the state of Michigan and will be litigated in the courts in the state of Michigan and county of Clinton.

By signing in the space below, the undersigned agrees to all of the foregoing terms and conditions and declare that all the submitted herein is true.

Name of Business

Print Name of Owner/Officer

Signature _____ Date _____

VALLEY FARMS SUPPLY USE ONLY

DATE: _____

NEW REVIEW

SALESMAN/NO: _____

BRANCH/NO: _____

PRICE TYPE: _____

FOR OFFICE USE ONLY

ACCOUNT# _____

TERMS: _____

CREDIT LIMIT: _____

APPROVED BY: _____

DATE: _____

AUTHORIZATION TO LEAVE SHIPMENTS WITHOUT SIGNATURE

I, _____ (owner)
with _____ (company) agree that Valley Farms Supply
may leave shipments without a delivery signature from our company, either at our jobsite or at
our office. If at any time a proof of delivery is requested from our company, a delivery receipt
signed by a Valley Farms Supply driver will be accepted as a valid proof of delivery.

Name of Business

Print Name of Owner/Officer

Title _____

Signature _____

Date _____