

Credit Application Report

Little Prince of Oregon Nursery, Inc.
15868 NE Eilers Rd.
Aurora, Or. 97002

Tel # (503) 678-5687
Fax # (503) 678-5887

Date: _____

Business Name: _____ Phone: _____

Principle Owners: _____

Billing Address (City,State,Zip): _____

Company Bank and Branch: _____

Account Number: _____ Amount of Credit Requested: _____

How Long in Business? _____ Federal ID# _____

Credit References: Please include: Suppliers and 30-day accounts. Avoid credit cards and credit unions.

Bank: _____ Phone: _____
Date Account Opened: _____ Balance: _____ Account Number: _____

Name: _____ Phone: _____
Date Account Opened: _____ Balance: _____ Account Number: _____

Name: _____ Phone: _____
Date Account Opened: _____ Balance: _____ Account Number: _____

Name: _____ Phone: _____
Date Account Opened: _____ Balance: _____ Account Number: _____

Name: _____ Phone: _____
Date Account Opened: _____ Balance: _____ Account Number: _____

Name: _____ Phone: _____
Date Account Opened: _____ Balance: _____ Account Number: _____

I, herein make the application to Little Prince of Oregon Nursery, Inc. for credit. If credit is granted I agree to pay all bills when rendered. In the event that payment is not made and it becomes necessary for Little Prince of Oregon Nursery, Inc. to obtain collection services or the services of an attorney to secure collection of this account, I will be responsible for all such collection fees and other costs associated with my failure to pay. To the best of my knowledge, everything stated in this application is correct. Furthermore, I authorize Little Prince of Oregon Nursery, Inc. to inquire into my credit and banking references as disclosed on my application. Also, I realize that I am personally liable for the debts incurred by my company.

Signature of Owner: _____ Title: _____ Date: _____

Signature of Co-Owner: _____ Title: _____ Date: _____