

P O Box 574 Tyngsboro, MA 01879 (978) 649-4444 ph (978) 649-4446 fax

CREDIT APPLICATION AND GUARANTY OF PAYMENT AGREEMENT

Company Name			Credit requested \$		
Mailing Address					
	P O Box or Street		Town	State	Zip
Shipping Address _					
	Street		Town	State	Zip
Phone #		Fax #			
Cell #		email			
Type of Company	Corporation _	Partnership _	Propri	etorship	Yrs in Business
Tax ID #	Tax E	Exemption Certif	icate#		(include copy)
Principal's Informat	ion				
Name					
Home Address					
	Street	Town		State	Zip
Date of birth		Soc Sec#_			
	Attach ad	dditional sheet for	each prind	cipal	
Terms and Condition	ons				
• Invoices due Net 15 th Pr • All costs from collection applicant's account if colle secure the extension of cr herein. •The applicant(s information to be used for Irrigation Supply Inc to the (and jointly guarantees if a understood that this guara including collection costs, reorganization, or sale of	efforts including court fili ection procedures are installed edit by Stateline Irrigation authorize Stateline Irrigation the purposes of credit desperson(s) or company napplicable) payment for a enty shall be continuing a interest, and attorney's for	ng fees, attorney's feet tituted. •The applican Supply, Inc and that ation Supply Inc to coecisions. • In consider the amed in this applicational purchases made by and irrevocable, bindinges, should the balance.	es, and notifint(s) certify there are no ntact any creation of the on, the unde the applicar g the guarance become p	cation delivery fe that this application material omissicalit reporting age sale of merchan rsigned guarantor, it, his guarantor, ator to pay on deleast due. The incontrol	sees will be charged to the on has been made to ons or misstatements ency periodically to obtain dise on credit by Stateline or personally guarantees or his agent. It is further mand any balance, corporation, merger,
I/WE THE UNDERSIGN	NED AGREE TO ALL	THE ABOVE TERM	S AND CO	NDITIONS, AN	ID SPECIFICALLY
UNDERSTAND AND A	GREE THAT I/WE WII	LL BE PERSONALI	Y BOUND	AND LIABLE F	OR FULL PAYMENT
ON THIS ACCOUNT.					
Signe	d		Date	e	
	individually as guara	antor			
Signe	d		Date	e	

individually as guarantor