How did you hear of Johnson Farms?

IMPORTANT:

PERSONAL GUARANTY MUST BE
SIGNED FOR CREDIT CONSIDERATION





DEERFIELD, NEW JERSEY

856-358-1123 / FAX 856-358-1319

PLEASE WRITE LEGIBLY

AMOUNT OF CREDIT REQUESTED

\$

CREDIT APPLICATION

Business Name Mailing Street Address		Ph	one #	Fax #	
		City	State	Zip Code	
Shipping Street Address (NO PO BOXES)		City	State	Zip Code	
NAM	E OF OFFICERS/OWNERS: (ADDITIO	DNAL SHEETS MA	Y BE ADDED	TO END OF APPLICATION)	
1)					
- ,	Name (Title)	SS#		DL #	
	Street Address	City	State	Zip Code	
	Home Phone #		Cell Phone	#	
2)					
	Name (Title)	SS #		DL#	
	Street Address	City	State	Zip Code	
	Home Phone #		Cell Phone	#	
3)					
<u>- 1 </u>	Name (Title)	SS#		DL #	
	Street Address	City	State	Zip Code	
	Home Phone #		Cell Phone	#	

AUTHORIZED SIGNERS ON ACCOUNT ARE:

Name		Title	Business Phone		Cell Phone
Name		Title	Business Phone		Cell Phone
ВА	NK REFE	RENCES			
<u>1)</u>					
	Bank Name		Bank Contact		Check/Sav/Mort Acct#
-	Street Address	City	State	Zip Code	Fax #
2)					
	Bank Name		Bank Contact		Check/Sav/Mort Acct #
	Street Address	City	State	Zip Code	Fax #
		<u>(4)- TRAD</u>	E REFEREN	CES	
		ade references			
		<u>(net30days). Th</u>			
<u>Gro</u>	<u>wers, Hard-G</u>	<u>oods Distributo</u>	<u>rs, or similar</u>	<u>Trade Ro</u>	<u>eferences Only.</u>
1)					
	Company Name			Contact	
	Street Address		City	State	Zip Code
			-		
	Phone #	Fa	x #		Account #
2)					
	Company Name			Contact	
	Company manu				
	Street Address		City	State	Zin Codo
	Street Address		City	State	Zip Code
	Dhana #		#		A
	Phone #	ra	x #		Account #
3)					
	Company Name			Contact	
	Street Address		City	State	Zip Code
	Phone #	Fa	x #		Account #
4)					
	Company Name			Contact	
	Street Address		City	State	Zip Code

Fax #

Account #

Phone #

Form of Company Ownership (Circle	One) Individual	Partners	hip Corp	poration	LLC
How Long in Business	State of Inc	corporation			
Business Tax Identification # or Ind	ividual SS #:				
Accounts Payable Contact Person_			Phone #		
Are your purchases taxable? \Box	YES \(\square\) NO		ch a copy of your t		tificate.)
Have you ever declared Bankruptcy	before? \square Yes	s 🗆 No			
Do you have judgments? \Box Ye	s⊡No Under wha	t name?			
Upon request of Johnson Farms, Inc. Johnson Farms, Inc. regarding any with my account without liability on Sincerely,	transaction with you				
Business Name	Street,	City	<u>,</u>	State,	Zip
Signature Individual (Must be corporate Officer)	Date	Print Na	me	Title	
	MINI MI	RANDA WARNING			
"THE CREDIT INFORMATION CONTA	AINED IN THE APPLIC	ATION IS AN ATTEM	PT TO COLLECT AN	Y OUTSTANDII	NG DEBTS,

AND ANY INFORMATION WILL BE USED FOR THAT PURPOSE AND KEPT CONFIDENTIAL."

Payment terms and guaranty: The made for the benefit of myself signing this agreement, I/(We rendered in the name of the uncof purchase. I also agree that month; 18% annum, will be as balances unpaid within set terbalances are not paid within placed for collection, I agree collections and reasonable attodue and payable in the Town County, New Jersey.	f and/or a corpo e) agree to pa dersigned, within an interest charg sessed to my a ms. In the ever set terms and se to be liable for orneyís fees. Al	ration. By y invoices thirty days ge 1.5% per count for that any ubsequently all cost of I sales are
Signature-Individual	Print Name	Date
Signature - Corporation	Print Name, Title	Date
PERSONAL GUARANTY: MUST SIGN	FOR CONSIDERA	TION
Signature – Individual	Print Name	Date
IF A PARTNERSHIP, BOTH PARTNERS	MUST SIGN BELOW:	
Officer of Corporation	Print Name	Date
Officer of Corporation	Print Name	Date
OFFICE USE ONLY:		
APPROVED BY	DATE	
AMOUNT OF CREDIT AUTHORIZED \$		