Black River PRODUCE
Your Fresh Connection

P.O. Box 489
449 River Street
North Springfield, VT 05150
Tel. 800-228-5481
Fax 802-886-7490
www.blackriverproduce.com

# Credit Application

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|---|---|
| Name of Firm: | Sales Person: |
| Street Address: | Date: |
| Mailing Address: | Terms Applying For: □ Net 7 □ Net 14 □ Net 30 □ COD |
| City: | Phone Number: |
| State: Zip code: | Fax Number: |
| | Kind of Business: |

| | 1.) | 2.) |
|---|---|---|
| Names of Officers/Owners: | | |
| Social Security Number: | | |
| Date of Birth: | | |
| Home Address: | | |
| Home Telephone: | | |

| | |
|---|---|
| Years Established: | Is The Business Incorporated?: □ Yes □ No |
| Corporation Name: | Bank Affiliation: |
| Building Owned or Leased: □ Own □ Lease | Account Number: |

To secure the payment of Applicant's obligations to Black River Produce ("BRP"), applicant and guarantor herby grant BRP a security interest in any of the following property related to the business which applicant may own, plus (a) all property of the same classes which may be acquired by applicant or guarantor subsequent to the execution of this Application: (b) all proceeds thereof: and (c) all increases, substitutions, replacements and additions thereto. The property subject to this provisions all inventory, equipment, machinery, furniture, fixtures, accounts, accounts receivable, contracts and contracts rights. BRP is authorized to file a UCC Financing Statement to confirm this security interest.

| | 1.) | 2.) |
|---|---|---|
| **Signatures of Officers/Owners:** | | |
| **Print Names:** | | |

**Business References:** Acct. Number, Telephone & Fax (No Banks or Utilities, Suppliers Only Please)

| 1.) | 2.) | 3.) |
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I (We) hereby authorize the credit references to release information regarding the credit standing for the above mentioned account. If credit is granted, the undersigned personally guarantees the company's credit and agrees to pay all invoices within credit terms, plus late charges of 1.5% per month on all overdue balances, as well as any/all collection costs and/or reasonable attorney fees and court costs. Applicant warrants that the information contained herein is true and correct.

| | 1.) | 2.) |
|---|---|---|
| **Signatures of Officers/Owners:** | | |
| Individuality and as an officer of the firm | | |
| **Print Names:** | | |
| **Date:** | | |

| **Credit Department Use Only:** | 1.) | 2.) | 3.) |
|---|---|---|---|
| Length of time sold: | | | |
| High Credit: | | | |
| Terms: | | | |
| Pays When Due: | | | |
| Other Comments: | | | |
| Authorized By: | Credit Limit: | | Date: |