

Micro Hydroponics

2437 Zanker Rd., San Jose, CA 95131
Phone (408) 321-0123 | FAX (408) 321-0125
www.microhydroponics.com

Account Application

Please fill out the information below and return it as soon as possible in order for us to process your request and have complete / accurate information in your file. Thank you for taking the time to help us serve you better.

STORE / BUSINESS INFORMATION

Business Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____

Phone No: _____ Fax No.: _____ Mobile No: _____

Contact Person: _____ Owner: _____

Business Type: (check one) _____ Sole Proprietorship _____ Partnership _____ Corporation

If Incorporated, Date Corporation Started: _____ Federal Tax ID#: _____

Years Established _____ Amount of Credit Requested _____

TAX STATUS: Taxable _____ Resale _____ Government _____ TAX ID NUMBER _____

(Please include your resale license or a tax-exempt form.)

Web site _____ E-Mail _____

BANK REFERENCE

Banking Institution: _____ City: _____ State: _____

Contact Person: _____ Phone #: _____

Account #: _____ Checking _____ Savings _____

CREDIT REFERENCES

1) Company: _____ Contact Person: _____

Address: _____

Phone # _____ Fax Number: _____

Account Number: _____

Comments: _____

2) Company: _____ Contact Person: _____

Address: _____

Phone # _____ Fax Number: _____

_____ Account Number: _____

Comments: _____

3) Company: _____ Contact Person: _____

Address: _____

Phone # _____ Fax Number: _____

_____ Account Number: _____

Comments: _____

CREDIT AGREEMENT

Customer verifies that the above information is true and correct and hereby grants permission for any person to furnish **Micro Hydroponics** any and all information that may periodically be requested. Customer agrees to honor all terms and conditions of the most current price list. Customer agrees to pay for any and all deliveries. Credit terms are at the absolute discretion of creditor who may terminate, alter or deny credit terms without notice, and without cause. All sales on new credit accounts are DUE UPON RECEIPT for the first 90 days and thereafter are NET 30 days from the date of the invoice, unless otherwise specified on the invoice. All past due accounts accrue interest at 1.5% per month on the declining unpaid balance. The accrual of payment of interest does not authorize the customer to defer payment of any indebtedness beyond the credit terms stated herein. In the event of the delinquency of any account, customer agrees to pay all collection costs, attorney's fees, and court costs incurred in the collection of said account, regardless of whether judicial action is undertaken.

AUTHORIZING STATEMENT

The undersigned:

- 1) Certifies that all information provided is true and correct
- 2) Agrees to abide by the terms of credit specified above

Signature: _____ Date: _____

Officer Signature (If Corp.) _____ Date: _____

PERSONAL GUARANTY OF PAYMENT

I (We), _____, personally guarantee payment in full when due of any and all indebtedness of _____ (*Name of store/customer*) to Micro Hydroponics, Inc., including collection costs and attorney's fees.

Date _____

Guarantor _____

Guarantor _____

SS# _____

SS# _____

Witness _____

Witness _____