BLOOMING ORCHID

APPLICATION FOR CREDIT

TRADE OR CORPORATE NAME	Œ :	
OWNER		
ADDRESS:		
MANAGER:		
CITY:	YEARS IN	· · · · · · · · · · · · · · · · · · ·
BUSINESS:		
STATE:	TEL#:	
NEW:/ UPDATE:/_/	FAX#:	
REFEREN PLEASE LIST 4 FIRMS FROM WHOM BASIS	ICES FOR COMMERCIAL USE I YOU ARE CURRENTLY BUYING	
NAME	CITY/STATE	TELEPHONE
1		
2		
3		
4		
	BANK REFERENCE	
NAME OF BANK	ACCOUNT#	
CITY/STATE:	BRANCH:	
NAME OF OFFICER:		
THE ABOVE INFORMATION IS CORRECT AUTHORIZE BLOOMING ORCHID TO VESTURTHER VERIFY THAT WE ARE CURRIN CONSIDERATION OF YOUR EXTEND THAT A FINANCE CHARGE OF ONE ANI PAYABLE ON ALL BALANCE OVER 21 COLLECTION, WHETHER SUIT BE BROUBUT NOT BE LIMITED TO ATTORNEY'S THE COLLECTION PROCESS. I/WE UNDERSTAND YOUR TERM OF SA ACKNOWLEDGEMENT BY BLOOMING OF INPOICE CLAIMS FOR DAMAGE CAUSED BY DE	ERIFY ANY AND ALL REFERENCES WEENT WITH ALL OTHER SUPPLIERS AN ING CREDIT ON THE ABOVE ACCOUND ONE HALF (1 ½%) PERCENT PER MODAYS. THE UNDERSIGNED AGREES TO UGHT OR NOT, SAID COSTS OF COLLIFEES, COURT COSTS, AND ALL OTHE LES ARE: NET 21 DAYS FROM DATE CORCHID CONSTITUTES THE ONLY FROEROR. SALE ARE F.O.B. NEW YORK LAY AND SHORTAGES DIRECTLY TO COMMENT OF THE ORDER OF	E HAVE GIVEN, I/WE ID CREDIT GRANTORS. IT, I/WE FURTHER AGREE ONTH WILL BE DUE AND O PAY ALL COST OF ECTIONS SHALL INCLUDE IR COSTS EXPENDED IN OF INVOICE. WRITER OOF OF CLAIM FOR IT THEREFORE MAKE
SIGNATURE OF OWNER OR CORPORAT	E OFFICER PRINT NAME	3
TITLE	DATE	

BLOOMING ORCHID

PERSONAL GUARANTY