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CREDIT APPLICATION

Firm

Firm Name _____ Type of Business _____
 Billing Address _____ City _____ State _____ Zip _____
 Street Address _____ City _____ State _____ Zip _____
 Shipping Addr. _____ City _____ State _____ Zip _____
 Phone No. _____ Fax No. _____ Date Established _____
 Business Type: Proprietorship _____ Partnership _____ Corporation _____
 Federal I.D. No. _____ Amount of Credit Requested _____

Bank

Bank Name _____ Phone No. _____ Fax No. _____
 Address _____ City _____ State _____ Zip _____
 Account No. _____ Bank Contact _____

Company Owners or Officers

1. Name _____ Title _____ Phone No. _____
 Home Address _____ City _____ State _____ Zip _____
 2. Name _____ Title _____ Phone No. _____
 Home Address _____ City _____ State _____ Zip _____
 3. ACCOUNTS PAYABLE Name of Bookkeeper _____ Phone No. _____

Suppliers Where Credit Is Established For 1 Year or More

1. Name _____ Phone No. _____ Fax No. _____
 Street Address _____ City _____ State _____ Zip _____
 Account No. _____
 2. Name _____ Phone No. _____ Fax No. _____
 Street Address _____ City _____ State _____ Zip _____
 Account No. _____
 3. Name _____ Phone No. _____ Fax No. _____
 Street Address _____ City _____ State _____ Zip _____
 Account No. _____

Credit Authorization

Purchaser agrees that in the event of a default in the payment of any amount when due, SELLER SHALL BE ENTITLED TO COLLECT A LATE CHARGE IN THE AMOUNT OF 2% PER MONTH (24% PER YEAR), OR THE MAXIMUM AMOUNT ALLOWED BY LAW, WHICHEVER IS LESS. This charge will be added to all amounts past due until the date paid. In addition, seller is entitled to all other rights and remedies available under law. Purchaser further certifies that all information on this credit application is true.

Purchaser hereby grants all banks and lenders, listed above, permission to release financial information.

Owner's Signature _____ Title _____ Date _____