

HERITAGE SEEDLINGS & LINERS CONFIDENTIAL CREDIT APPLICATION

Ар	plicant:			Phone:			
Ma	niling address: _						
Shi	pping address:						
Org	ganization: Pro	prietorship Corp	oration	Par	tnership		
Ow	ners' or princip	oals' names: (1)				(2)	
	Home add	Iress:					
Yea	ar present owne	er established <u>:</u>					
Am	nount of credit i	requested: <u>\$</u>					
Sup	opliers of plants	(Please furnish COMPL	ETE informat	tion):			
1.	Firm (Plant vendor)			3.	Firm (Plant vend	lor)	
	Address				Address		
	City	State	Zip		City	State	Zip
	Phone	Email/Fax			Phone	Email/Fax	
2.	Firm (Plant vendor)			4.	Firm (Plant venc	lor)	
	Address				Address		
	City	State	Zip		City	State	Zip
	Phone	Email/Fax			Phone	Email/Fax	
For	your protection	as well as ours, your signat	ure as applica	nt is req	uired.	o qualify applicant and determine ersonally guarantee payment of all of	
Her	ritage Seedlings 8	& Liners, as well as costs of	collection.				
by	Heritage Seedlin		and service	charge a	at the rate of	all collection, attorney, and/or court 1.5% per month on all amounts du County, Oregon.	
		charged for any returned of				· -	
App	olicant further ag	rees to abide by all other t	erms stated ir	n the He	ritage Seedlin	gs & Liners catalog.	
Na	me of Owner:	e of Owner: Sign				Date:	