Farm&Home SUPPLY
Outfitting Your Lifestyle

BUSINESS APPLICATION FOR CREDIT

(Not For Individual Use)

NAME OF COMPANY OR ORGANIZATION_____
STREET_____ CITY_____
STATE_____ZIP_____PHONE_____FAX_____
E-MAIL ADDRESS _____

IF YOUR ARE CLAMING SALES TAX OR RESALE EXEMPTION, A COPY OF YOUR STATE ISSUED EXEMPTION CERTIFICATE MUST ACCOMPANY THIS CREDIT APPLICATION

BUSINESS OPERATES AS: CORPORATION ___ PARTNERSHIP ___ PROPRIETORSHIP ___ NON PROFIT ___ GOVERMENT ___ RESALE___
IN BUSINESS SINCE: _____ TYPE OF BUSINESS_____
CONTACT PERSON_____
IF INCORPORATED NAME OF: PRESIDENT_____
VICE PRESIDENT_____ SECRETARY_____
IF PARTNERSHIP, NAME OF PARTNERS:_____

BANK REFERENCE_____
STREET_____CITY_____STATE_____ZIP_____
PHONE#_____FAX#_____

BUSINESS REFERENCE_____
STREET_____CITY_____STATE_____ZIP_____
PHONE#_____FAX#_____

BUSINESS REFERENCE_____
STREET_____CITY_____STATE_____ZIP_____
PHONE#_____FAX#_____

PERSONS AUTHORIZED TO CHARGE ON YOUR ACCOUNT:

_____ _____ _____
_____ _____ _____

FOR USE AT: (Circle One) **QUINCY – JACKSONVILLE – JERSEYVILLE – PITTSFIELD – HANNIBAL – SPRINGFIELD EAST – KEOKUK**

ALTON – SPRINGFIELD WEST— HAVANA — HIGH RIDGE –- COTTLEVILLE

AMOUNT OF CREDIT REQUESTED _____

Applicant agrees to pay reasonable Attorney fees, collection fees, finance charges, and court costs in the event applicant defaults on its payment on this account. NOTICE: Finance charge of 1½ % per month on all delinquent accounts over 30 days. Delinquent accounts may be suspended, closed, or have legal action taken.

Account balances are due by the 10th of each month following statements.

Please return the application to any cashier or mail, fax, email to:

Attn: Accounts Receivable.
Farm & Home Supply Co.
PO Box 3745
Quincy, IL 62305-3745

Phone: 217-223-6970
Fax: 217-223-1611
email: receivables@farmandhomesupply.com

I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that is it to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions and or business references listed in the credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein.

SIGNATURE: _____DATE: _____

WE LOOK FORWARD TO SERVING YOU!

Revised 3/27/17