



Credit Application

Please Complete and Send To: Intergro, Inc.
Valerie Novakoski, Controller
P.O. Box 567
Safety Harbor, FL 34695
Fax (727) 799-1742

Phone (727) 799-9663

Information given by the undersigned will be held in strict confidence and will be used solely by *Intergro, Inc. / Polygro, LLC*, for the purpose of extending credit. Please provide a copy of your most recent Financial Statements to assist our review in establishing your credit line needs.

Name of Applicant (Please provide registered Legal Name): _____

Trade Name (DBA if any): _____

Street Address: _____

City: _____ State: _____ County: _____ Zip: _____

Phone : () _____ Fax: () _____

E-mail (for order confirmations): _____

Billing Address (If different): _____

Business is: Incorporated Proprietorship Partnership
 LLC LLP Not-for-Profit Organization

Date Business Established: / / If Incorporated, Date of Incorporation: / /

State of Incorporation: _____ Federal I.D. Number: _____

PRINCIPAL OWNERS, OFFICERS AND PARTNERS: (Attach separate sheet with additional information, if necessary)

Name: _____ **Title:** _____

Home Address: _____

Name: _____ **Title:** _____

Home Address: _____

CREDIT REFERENCES

Trade References (Industry Related):

Name: _____ **Address:** _____

Phone: _____ **Fax:** _____ **Contact:** _____

Name: _____ **Address:** _____

Phone: _____ **Fax:** _____ **Contact:** _____

Name: _____ **Address:** _____

Phone: _____ **Fax:** _____ **Contact:** _____



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Bank Reference:

Name:	Address:	
Account #		
Phone:	Fax:	Contact:

Applicant certifies that all information contained herein is true and correct. Applicant grants permission to *Intergro, Inc. / Polygro, LLC*, to obtain independent credit reports or credit reports and other information from its references and bank, and authorizes the credit references and bank reference to release information to *Intergro, Inc. / Polygro, LLC* that may be used to determine credit worthiness. Applicant agrees to pay all bills as rendered and agrees that overdue accounts are subject to monthly service charges of one and one-half percent (1 ½%) per month. Applicant agrees to pay all costs of collection, including actual out-of-pocket expenses and a collection fee of twenty-five percent (25%) if collected through a collection agency or attorney. The laws of the State of Florida shall govern all contracts entered into between Applicant and *Intergro, Inc. / Polygro, LLC*, and all disputes may be resolved within the courts within the State of Florida.

<u>Dated:</u>	<u>Company:</u>
<u>Signature:</u>	<u>Print Name:</u>
<u>Title:</u>	

The undersigned is either a sole proprietor, a partner in a partnership, an individual who may be executing a personal guarantee in connection with the extension of credit to Applicant, or one of the principal stockholders of a corporation. I give permission to *Intergro, Inc. / Polygro, LLC*, to obtain and utilize an individual credit report on me personally to determine my creditworthiness.

<u>Dated:</u>	<u>Signature:</u>
<u>Social Security No.:</u>	

THE FEDERAL EQUAL CREDIT OPPORTUNITY ACT PROHIBITS CREDITORS FROM DISCRIMINATING AGAINST CREDIT APPLICANTS ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, MARITAL STATUS; AGE;(PROVIDED THE APPLICANT HAS THE CAPACITY TO ENTER INTO A BINDING CONTRACT); BECAUSE ALL OR PART OF THE APPLICANTS INCOME DERIVES FROM ANY PUBLIC ASSISTANCE PROGRAM; OR BECAUSE THE APPLICANT HAS IN GOOD FAITH EXERCISED ANY RIGHT UNDER THE CONSUMER CREDIT PROTECTION ACT. THE FEDERAL AGENCY THAT ADMINISTERS COMPLIANCE WITH THIS LAW CONCERNING THIS CREDITOR IS FEDERAL TRADE COMMISSION, EQUAL CREDIT OPPORTUNITY; WASHINGTON, D.C. 20580.

If your application for business credit is denied, you have the right to a written statement of the specific reasons for denial. To obtain the statement, please contact Valerie Novakoski, Controller, Intergro, Inc. P.O. Box 567, Safety Harbor, FL 34695, within 60 days from the date you are notified of our decision. We will send you a written statement of the reasons for denial within 30 days of receiving your request for the statement.