

**CHIEF MOUNTAIN FARMS, LLC**  
**116 Chiefs Mountain Lane**  
**Port Deposit, MD 21904**

**PHONE: 443-350-3894**  
**FAX: 410-658-7333**  
**www.chiefmountainfarms.com**

**CREDIT APPLICATION**

To Prospective Customers:

Thanks for your interest in our products and the opportunity to conduct business with you. We offer Net 30-day credit terms for customers with approved accounts. Please review our terms and conditions of credit and sale. To establish an account, complete this form and return by mail or fax. If you have any questions, please give us a call. We look forward to working with you!

**TERMS AND CONDITIONS OF CREDIT AND SALE**

- Charges are payable in U.S. funds.
- Claims for plant damage, shortages, or other errors should be made within 48 hours of receipt.
- If an order is canceled and it has already been picked for shipment, then a restocking fee of 20% will be charged. Shipped items will not be accepted for return without prior approval, and they will be subject to the same 20% service charge.
- Customer agrees to pay full balance of invoice within 30 days (terms are Net 30 days). Any balance that remains unpaid after 30 days is past due.
- A service charge of 1.8% per month (21.6%/year) will accrue on past due accounts.
- We reserve the right to suspend credit, hold plant shipments, and remove discounts on past due accounts.
- The exclusive venue for the resolution of any dispute arising from the provisions of this agreement shall fall under the jurisdiction in Cecil County, Maryland.

Name of Business: \_\_\_\_\_

Billing Address: \_\_\_\_\_ Shipping Address (if different from business): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Type of Ownership:    \_\_\_ Sole Proprietorship    \_\_\_ Partnership    \_\_\_ Corporation

Type of Business: \_\_\_\_\_ Federal ID# \_\_\_\_\_

How long has business been established \_\_\_\_\_ Sales Tax Exempt \_\_\_\_\_

Officers of the Company:

Name \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

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Business Bank Reference:

_____		_____	
Name of Bank	Address		
_____		_____	
Phone	Fax		
_____		_____	
Type of Account	Account Number	Authorized Signature	
_____		_____	
Type of Account	Account Number	Authorized Signature	
_____		_____	

Trade References (list 3 companies with whom you currently have established credit):

1. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

2. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

3. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

Authorization for Release of Information: The undersigned authorizes any banks and trade references to release information to Chief Mountain Farms, LLC concerning any credit inquiries.

Default and Collection Fees: In the event of default under any of the terms in this agreement, the undersigned promises to pay all reasonable collection costs, including, but not limited to court costs, private process server fees, post-judgment collection costs, and reasonable attorney fees.

I declare that I am an authorized individual of the business named above, and that the information provided on this form is true and correct. It is noted that all outstanding sums owed to Chief Mountain Farms, LLC will be paid in full, within thirty (30) days from date on invoice. No extensions of the payment period will be valid unless in writing and signed by Chief Mountain Farms, LLC, its principles, agents or attorneys. I have read the above credit terms and agree to pay all amounts due, including any finance charges and collection fees, as noted above.

\_\_\_\_\_  
Printed Name of Applicant/Owner/Officer

\_\_\_\_\_  
Date of Application

\_\_\_\_\_  
AUTHORIZED SIGNATURE