



Bill Moore & Co., Inc.

New Customer Information Form

Date _____

1. Name of Business _____

2. Mailing Address _____

3. Physical Address _____

4. Contact Name (First & Last) w/ Title _____

5. Phone Number _____ Cell Phone _____
E-mail _____ Fax _____

6. Web site Address _____

7. Date Business Began _____

8. Tax Number _____

9. Nearest Airport _____

10. Shipping Preferences _____

11. How did you hear about us? _____

12. Notes _____

Bill Moore & Co., Inc.
PO Box 1587 Brandon, FL 33509
Office: 813-689-6706
Fax: 813-684-5856
www.billmooreco.com



Bill Moore & Co., Inc. Credit Application

Nursery/Greenhouse Name _____ Tax # _____

Owner's Name _____

Address _____

Phone # _____ Fax # _____ E-mail _____

Type of Business: Sole Proprietor___ Partnership___ Corporation___ Other___

Do you: Own___ Lease___ Rent___ place of business? Years at location _____

Name of officers and/or partners:

Name (First and Last)	Address	Title	Phone
_____	_____	_____	() _____
_____	_____	_____	() _____
_____	_____	_____	() _____

Trade References- Complete four references, with at least two being plant suppliers

Name _____
Address _____

Phone _____ Fax _____ E-mail _____

Name _____
Address _____

Phone _____ Fax _____ E-mail _____

Name _____
Address _____

Phone _____ Fax _____ E-mail _____

Name _____
Address _____

Phone _____ Fax _____ E-mail _____

As part of this application for credit, we grant permission to obtain credit references from our suppliers. We further agree to pay a service charge of 1 ½ % per month (or legal rate) on invoices not paid according to terms.

Date _____

Signature _____
Title _____

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Terms & Conditions of Sale

- An account is considered past due after the 31st day of the following month. A 1 ½ % service charge is applied at the end of the month the payment was due and each month thereafter it is delinquent. Credit may be suspended at the discretion of Bill Moore & Co., Inc. depending on amount owed, age of delinquency payment record, or length of time dealing with our company.
- Should this account be filed for collection, the debtor will be liable and agrees to pay all reasonable collection agent and attorney fees.
- Applicant agrees to notify the credit department of Bill Moore & Co., Inc. in writing of billing discrepancies within forty-five (45) days of receipt of disputed invoices. Failure to timely notify Bill Moore & Co., Inc. in writing shall act as a presumption that the invoices and deliveries are valid as stated.

Personal Guaranty

In consideration of the extension of credit by Bill Moore & Co., Inc. to _____, located at _____, the undersigned individuals do personally and individually guarantee payment of all charges, regardless of credit limit, together with interest from the date due of all charges on the account of the above named customer, include any and all attorney fees and/or collection costs in connection with collection of the above accounts.

This guaranty is an absolute and continuing guaranty to continue in effect until you shall receive notice in writing by certified mail of its revocation, but such revocation shall not be effective as to any indebtedness created prior to the receipt of such notice, or hereby agree that in the event a collection agent and/or an attorney is employed to collect any amount due hereunder to pay a reasonable collection and/or attorney fee and cost. We hereby acknowledge that the ultimate play of payment on this account is in Brandon, Hillsborough County, Florida. We waive any right of venue in the County where we may reside, or where these goods may have been purchased, and agree that should suit be instituted, that the venue will be in Hillsborough County.

We hereby agree that this guaranty shall be constructed under the laws of the State of Florida.

Witness _____

Signature _____

Address _____

Date _____

Witness _____

Signature _____

Address _____

Date _____

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