



Galema's Greenhouse Inc.

Customer Application

Legal Name _____ Date: _____

DBA: _____

Delivery Address: _____

Street Address

City

State

ZIP Code

Mailing Address: _____

Street Address

City

State

ZIP Code

Phone: _____ Email _____

Ordering Information

Primary Contact: _____ Additional Buyers: _____

Accounts Payable Contact _____ Accounts Payable Phone _____ Accounts Payable Email _____

Product Interests:	Young Plants <input type="checkbox"/>	Prefinished <input type="checkbox"/>	Spring <input type="checkbox"/>	Fall <input type="checkbox"/>	Poinsettias <input type="checkbox"/>	Custom Grown <input type="checkbox"/>
--------------------	--	---	------------------------------------	----------------------------------	---	--

Company Information

Entity Type:	Sole Proprietor <input type="checkbox"/>	LLC Individual <input type="checkbox"/>	Partnership/Corporate <input type="checkbox"/>	Corporation <input type="checkbox"/>	S-Corp <input type="checkbox"/>	Other (Specify) _____
--------------	---	--	---	---	------------------------------------	-----------------------

Business Type:	Retail <input type="checkbox"/>	Landscaper <input type="checkbox"/>	Fundraiser <input type="checkbox"/>	Farm Market <input type="checkbox"/>	Other <input type="checkbox"/>	Other (Specify) _____
----------------	------------------------------------	--	--	---	-----------------------------------	-----------------------

Federal ID# _____ State of Incorporation: _____ At present location since (Month/Year) _____

Should we charge you Sales Tax? YES ☐ NO ☐ If NO, please complete Indiana ST-105 or for Not For Profits – complete the form at INTIME and submit the completed form

How did you hear about us? _____

Have you ever filed bankruptcy? YES ☐ NO ☐ If yes, when? _____

Have you ever refused product? YES ☐ NO ☐ If yes, explain? _____

Primary Owner

Ownership %: _____ Phone# _____ Drivers License State & ID# _____

Other Owner(s)

Ownership %: _____ Phone# _____ Drivers License State & ID# _____

If you have additional owners, please list in an addendum.

Business/Trade References

Full Name: _____ Length of Relationship _____

Company: _____ Phone: _____

Address: _____ Email: _____

Full Name: _____ Length of Relationship _____

Company: _____ Phone: _____

Address: _____ Email: _____

Full Name: _____ Length of Relationship _____

Company: _____ Phone: _____

Address: _____ Email: _____

Bank Information

Name: _____ Contact _____

Branch: _____ Email: _____

Email _____ Account Type: _____

Length of Relationship _____ Account Number(s): _____

If you have more than one banking relationship, please list in an addendum.

Terms and Conditions

I certify that my answers are true and complete to the best of my knowledge.

All accounts are COD until a credit application has been completed, reviewed, and approved. Any credit application which is approved is subject to modification or revocation without notice and at the sole discretion of Galema's Greenhouse, Inc. If any indebtedness incurred pursuant to this request for credit is not paid in full when due, the undersigned agrees to pay all costs of collection, including all interest, court costs, processing fees and reasonable attorney's fees. Further, by signing below, you consent and submit to the jurisdiction of the State and Federal courts of the State of Indiana and waive any claims and defenses of forum non conveniens. Any balance so remaining unpaid shall bear interest at the lesser rate of 1.5% per month or the maximum rate permitted by applicable law until paid in full.

Acceptance and Approval

Signing this agreement indicates your acceptance of the terms and conditions as stated. In addition, you authorize Galema's Greenhouse Inc. to make any and all inquiries necessary to process this Customer Application as well as to cooperate with Galema's Greenhouse, Inc., including, but not limited to the execution of all additional documents as may be necessary for Galema's Greenhouse, Inc. to assess your application for credit.

Signature: _____ Date: _____