



Credit Application

Company Name: _____

Street Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Amount of Credit Desired: _____

Years in Business: _____

EIN Number: _____

(Please enclose your ST-4 form)

Owners and Partners

Name: _____

Street Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Name: _____

Street Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____



Credit References:

Business Name: _____

Contact: _____ Location: _____

Phone: _____ Fax: _____

Business Name: _____

Contact: _____ Location: _____

Phone: _____ Fax: _____

Business Name: _____

Contact: _____ Location: _____

Phone: _____ Fax: _____

Bank Reference:

Name: _____

Street Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Account Number: _____ Contact: _____

I hereby certify this information to be true.

Signed: _____ Date: _____

Title: _____

(Please remit this form along with a ST-4 to Bloom Waste Services by fax)



Payment Terms & Agreement of Service

In consideration of the extension of credit by Bloom Waste Services, LLC., I/we agree to pay all invoices on or before the respective due date. It is understood that all Invoices over 30 days are considered late and warnings will be given. Invoices over 60 days will be selected for C.O.D status. Accounts over 90 days will be turned over to an attorney for Civil Court Collections. It is further agreed that the undersigned agrees to pay all costs of collection, including court costs, attorney fees and cost incurred to collect any debt as awarded by any courts exercising jurisdiction under the bankruptcy code. It is expressly agreed by the applicant herein, that the courts of Camden County, New Jersey shall be the forum for the judicial resolutions of any dispute arising under the agreement of the services provided under any invoice to the applicant.

For the express purpose of obtaining the credit line request, the undersigned hereby authorizes the provider to contact any party shown on this application or use any other source of credit information to verify information shown, or obtain any information needed to establish a credit line.

It is the responsibility of the customer to notify Bloom Waste Services, LLC., in writing of the names of persons who shall no longer be authorized to incur credit on behalf of the applicant.

Signature: _____ Title: _____

For value received, in order to induce Bloom Waste Services, LLC., to grant credit for the herein named individual(s) I, the undersigned hereby guarantee payment for any credit extended to the above entities and agree to be jointly and severally liable with such entity for the credit extended pursuant to this application. This guarantee shall continue until I notify Bloom Waste Services, LLC., in writing of the termination of the guarantee.

Signature President/Owner: _____

Title: _____ Date: _____

Printed Name: _____