

R. H. Moore & Associates

Soil Stabilization & Erosion Control



R. H. Moore & Associates, Inc.
(813) 988-0200 Toll Free: (800) 330-2333 Fax: (813) 985-4533
Email: info@rhmooreassociates.com Website: www.rhmooreassociates.com

7834 Depot Lane
Tampa, FL 33637

P.O. Box 16549
Tampa, FL 33687

CREDIT AGREEMENT

TERMS AND CONDITIONS WILL APPLY ON ALL PRESENT AND FUTURE SALES

1. Payment due 30 days from invoice date. A 3.5% convenience fee will apply to credit card payments made other than at the time of sale.
2. You may avoid a *finance charge* if payment is received within 30 days of invoice date. The finance charge is calculated at the rate of 1.5% per month or 18% A.P.R.
3. Notice to Owners are filed in order to comply with state laws and to protect our rights. It is not to be interpreted as a negative reflection on the credit of the purchaser.
4. Written approval must be obtained before material may be returned.
5. **R. H. Moore & Associates, Inc.** reserves the right to charge a restocking fee on all materials returned.
6. Should this account be placed for collection, **R. H. Moore & Associates, Inc.** reserves the right to charge all collection costs and/or attorney's fees to said account.
7. In the event credit is denied, an explanation will be furnished upon written request.
8. Application will not be processed unless signed and dated.
9. There will be a \$35.00 charge per check for any returned/NSF checks.

I HEREBY AGREE TO ALL THE TERMS AND CONDITIONS OF THIS APPLICATION AND STATE THAT ALL THE INFORMATION GIVEN TO R. H. MOORE & ASSOCIATES, INC. IS CORRECT AND HEREBY PERSONALLY AGREE TO BE BOUND FOR THE DEBT INCURRED.

COMPANY NAME _____
PLEASE PRINT THIS LINE ONLY

SIGNATURE _____
CORPORATE OFFICER OR OWNER AND PERSONAL GUARANTOR

TITLE _____

DATE _____

COMPANY NAME _____

BILL TO ADDRESS _____

STREET

CITY

STATE

ZIP

PHYSICAL ADDRESS _____

STREET

CITY

STATE

ZIP

PHONE # _____ FAX # _____

A/P CONTACT _____ PHONE # _____

EMAIL _____

PREFERRED INVOICE DELIVERY METHOD (CHECK ONE) _____ MAIL _____ EMAIL

EMAIL _____

FEDERAL ID # _____ TYPE OF BUSINESS _____

PREVIOUS ADDRESS IF LESS THAN 3 YEARS _____

HOW LONG IN AREA? _____ HOW LONG IN BUSINESS? _____

OTHER COMPANY NAMES
YOU HAVE OPERATED UNDER

1.) _____

2.) _____

OWNER'S NAME _____ POSITION _____

PRESIDENT _____

VICE-PRESIDENT _____

DO YOU PAY TAX? _____ (IF TAX EXEMPT, ATTACH TAX EXEMPT CERTIFICATE)

DO YOU REQUIRE A PURCHASE ORDER NUMBER? _____

HAVE YOU EVER APPLIED FOR CREDIT WITH R. H. MOORE & ASSOCIATES, INC.? _____

IF YES, UNDER WHAT COMPANY OR NAME? _____

BANK REFERENCES

BANK _____

ACCOUNT # _____

ADDRESS _____

PHONE _____

BANK _____

ACCOUNT # _____

ADDRESS _____

PHONE _____

REFERENCES (VENDORS/SUPPLIERS)

NAME _____

COMMENTS _____

ADDRESS _____

PHONE _____

FAX # _____

NAME _____

COMMENTS _____

ADDRESS _____

PHONE _____

FAX # _____

NAME _____

COMMENTS _____

ADDRESS _____

PHONE _____

FAX # _____

NAME _____

COMMENTS _____

ADDRESS _____

PHONE _____

FAX # _____