

Indysod.com, LLC Wholesale Credit Application Agreement

Please return to:
Indysod.com, LLC
3554 N 350 West
Lebanon, Indiana 46052
www.indysod.com

Please mail the signed document to the above address. We cannot accept emailed or faxed photocopies.
Please retain a copy for your records.

Section 1: Business Entity Information (registered formal business entity)

Name: _____

Address: _____ City: _____ State: _____ Zip _____

PO Address: _____ City: _____ State: _____ Zip _____

Telephone: _____ - _____ - _____ Fax: _____ - _____ - _____ E-mail: _____ @ _____

Federal Tax ID#: _____ State Tax ID #: _____

Please mark entity type:

Proprietorship: ___ Corporation: ___ Sub S: ___ LLC: ___ Partnership: ___ Other: _____

Secondary Entity:

Doing Business As Name: _____

Address: _____ City: _____ State: _____ Zip _____

Telephone: _____ - _____ - _____ Fax: _____ - _____ - _____ E-mail: _____ @ _____

(Submit photocopy of your 'Certificate of Assumed Business Name' with application)

Section 2: General Business Information

Years in business: _____ Years at address: _____ Total annual revenue (most recent year): _____

Number of full time equivalent employees, including employee owners: _____

Total estimated annual sod purchases: in dollars _____ acres or square feet _____

List any sod suppliers purchased from within the last two years: _____

Please check all markets served and approximate total business revenue percentage by market:

<input type="checkbox"/> New residential construction – homebuilder: _____%	<input type="checkbox"/> Landscape maintenance & care: _____%
<input type="checkbox"/> New residential construction – direct: _____%	<input type="checkbox"/> Irrigation: _____%
<input type="checkbox"/> Residential landscaping/renovation (hardscaping, etc.): _____%	<input type="checkbox"/> Snow and ice removal: _____%
<input type="checkbox"/> New commercial construction: _____%	<input type="checkbox"/> Golf course: _____%
<input type="checkbox"/> Existing commercial landscaping/renovation: _____%	<input type="checkbox"/> Tree & Shrub care: _____%
<input type="checkbox"/> Sports fields construction/renovation: _____%	<input type="checkbox"/> Other: _____%
<input type="checkbox"/> Roads and highways: _____%	<input type="checkbox"/> Other: _____%

List Any Homebuilders Served:

Section 3: Billing Information

Do you require us to reference a purchase order number on invoices? ___ yes ___ no

Contact Name for Accounts Payable: _____

Phone Number for Accounts Payable (if different from main phone): _____ - _____ - _____

Contact E-mail (s) To E-Mail Invoices to: _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

Indysod.com, LLC prefers to email all invoices. If you require a mailed invoice, please check here ____

Section 4: Authorized Purchasers

Contact Name of Purchasing Manager (if applicable): _____

Phone Number: _____ - _____ - _____ Email: _____ @ _____

Please list all individuals authorized to make purchases

Name:	Title:	Phone:	Email:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Section 5: Ownership

1.	Name	Social Security #	Telephone
	Street	City, State	Zip % Ownership
2.	Name	Social Security #	Telephone
	Street	City, State	Zip % Ownership
3.	Name	Social Security #	Telephone
	Street	City, State	Zip % Ownership
4.	Name	Social Security #	Telephone
	Street	City, State	Zip % Ownership

Section 6: Bank and Credit Information

BANK INFORMATION

1. _____
Bank Account Number Type

Address Telephone Number Fax Number

2. _____
Bank Account Number Type

Address Telephone Number Fax Number

REFERENCES

1. _____
Company Telephone Number Fax Number

Address City, State Zip

2. _____
Company Telephone Number Fax Number

Address City, State Zip

3. _____
Company Telephone Number Fax Number

Address City, State Zip

4. _____
Company Telephone Number Fax Number

Address City, State Zip

CREDIT HISTORY

Has the company or any of its owners or partners:

- 1. Ever operated a business under a different name? Yes ___ No ___
- 2. Gone through or filed for bankruptcy in the last 10 years? Yes ___ No ___
- 3. Have any unsatisfied judgments or are you in default on any debt more than \$2,500? Yes ___ No ___
- 4. Have any current or pending lawsuits against you? Yes ___ No ___
- 5. Ever been denied credit? Yes ___ No ___
- 6. Have any credit account balances currently past due? Yes ___ No ___

If you have answered yes to any of these questions, please explain each:

Section 7: Credit Line Amount Requested

Credit line amount requested: \$ _____

Section 8: Terms and Conditions

Indysod.com, LLC's credit terms are defined on an individual customer basis, subject to credit approvals and until such approval all sales will be cash on delivery. Unless otherwise agreed to in writing and by a duly authorized member of Indysod.com, LLC, standard credit terms as contained within this agreement shall be Net 30 days from the date of the invoice. Invoices not paid within these terms will be subject to a finance charge of 1½% monthly, but not to exceed the maximum amount permitted by applicable state law. Finance charges shall be levied on past due balances on the 1st of each calendar month until all overdue balances are paid and any payments received will first be applied to any finance charges owed. Applicant hereby agrees to pay seller any such finance charges regardless of any purchase order policy that the applicant may have to the contrary.

If applicant experiences adverse financial conditions that may affect its credit worthiness or its ability to timely satisfy its debt to Indysod.com, LLC within the terms of this agreement, applicant hereby acknowledges that Indysod.com, LLC's position as a creditor may be at risk and therefore applicant agrees to immediately notify Indysod.com, LLC of its current financial position.

If there are any changes in material information submitted in this agreement pertaining to the firm or its owners/partners, Indysod.com, LLC must be notified within 10 days of such changes.

In the event of default in payment of any amount due and if the debt is placed with an agency or attorney for collection or legal action, applicant agrees to pay all costs associated with such collection attempts, including collection agency fees, attorney fees, and court costs. Applicant further agrees to pay all accrued service charges on said past due balances from date of invoice to the date of final payment and at the maximum rate allowed by laws of the state of Indiana governing these transactions.

No soliciting agent, sales representative or employee of Indysod.com, LLC shall have the power to waive any of the terms or provisions hereof, or to incur additional obligations or make additional representations or warranties on behalf of Indysod.com, LLC unless same are evidenced by an agreement, in writing, signed by a member of Indysod.com, LLC. Indysod.com, LLC reserves the right to refuse service and or change established terms at any time for any reason and the terms of any transaction shall remain in force per the terms in place at the time of the transaction.

Section 9: Attestation and Signature

For and in consideration of Indysod.com, LLC extending credit to applicant as herein provided, the undersigned do hereby attest the information provided as part of this agreement is for the purpose of obtaining credit and is warranted to be true. The undersigned has read and understands this entire agreement and accept the Terms and Conditions herein stated.

The undersigned attests to the firms' financial responsibility, ability and willingness to pay its debts incurred within this agreement and has the authority to authorize Indysod.com, LLC, or its agent, to investigate the firm and authorizes any bank, mortgage lender, lordlord, credit reference, credit reporting agency or any other party to release information to Indysod.com, LLC, or its agent, and hold Indysod.com, LLC harmless for said disclosure.

Firm Name (Print)

X _____
Owner /Partner Signature

Name and Title (Print)

X _____
Owner /Partner Signature

Name and Title (Print)

X _____
Owner /Partner Signature

Name and Title (Print)

X _____
Owner /Partner Signature

Name and Title (Print)

Section 10: Personal Guarantee

The undersigned do personally, unconditionally, irrevocably, absolutely jointly and severally, assume liability and guarantee payment of all amounts due or to become due by applicant to Indysod.com, LLC according to the terms of this agreement and authorize Indysod.com, LLC, or its agent, to investigate personal credit and authorizes any bank, mortgage lender, landlord, credit reference, credit reporting agency or any other party to release information to Indysod.com, LLC, or its agent, and hold Indysod.com, LLC harmless for said disclosure.

X _____
Owner /Partner Signature

Name (Print) Date

X _____
Owner /Partner Signature

Name (Print) Date

X _____
Owner /Partner Signature

Name (Print) Date

X _____
Owner /Partner Signature

Name (Print) Date