



Imperial Nurseries, Inc.
 90 Salmon Brook Street
 P.O. Box 120
 Granby, CT 06035-0120

(860) 653-4541 in Connecticut
 (800) 343-3132 outside Connecticut
 (860) 653-8979 FAX
 a company of Griffin Land & Nurseries, Inc.

CASH APPLICATION AND ACCOUNT AGREEMENT

Territory Manager _____

APPLICATION DATE

For the purpose of establishing a cash account & to indicate as to terms of future purchases, the undersigned represents:

Section One

Legal Business Name _____ Business Phone () _____
 DBA or Trade Style _____ FAX () _____
 Street Address _____
 Mailing Address _____ PO Box Number _____
 City/State _____ Zip Code _____ Year Business Organized _____
 Email Address _____ (under current ownership)
 State Resale Tax Exempt Number _____ Issuing State _____
 (if tax-exempt, please complete and return attached tax-exemption form) Purchase Order # received on orders? Yes No
 Business License Number _____
 Own Rent Lease Term of Lease _____

TYPE OF BUSINESS

Garden Center Landscaper Rewholesaler Other _____
 Individual Partnership Corporation Limited Liability Partnership (LLP)* Limited Liability Corporation (LLC)*
 Social Security Number (if individual) or Federal ID Number (Partnership, Corporation, LLP or LLC) _____ State of Incorp. _____

INDIVIDUAL/PARTNERS/OFFICERS/GUARANTORS/MEMBERS

Section Two

NAME	NAME	NAME
TITLE	TITLE	TITLE
HOME ADDRESS (Street, City, State, Zip)	HOME ADDRESS (Street, City, State, Zip)	HOME ADDRESS (Street, City, State, Zip)
TELEPHONE NUMBER (w/ AREA CODE)	TELEPHONE NUMBER (w/ AREA CODE)	TELEPHONE NUMBER (w/ AREA CODE)
SOCIAL SECURITY NUMBER & DRIVERS LISCENSE NUMBER	SOCIAL SECURITY NUMBER & DRIVERS LICENSE NUMBER	SOCIAL SECURITY NUMBER & DRIVERS LICENSE NUMBER

TRADE REFERENCES — Names of major GREENGOODS suppliers

Section Three

NAME	NAME	NAME
MAILING ADDRESS	MAILING ADDRESS	MAILING ADDRESS
CITY STATE ZIP	CITY STATE ZIP	CITY STATE ZIP
TELEPHONE NUMBER (w/ AREA CODE)	TELEPHONE NUMBER (w/ AREA CODE)	TELEPHONE NUMBER (w/ AREA CODE)
FAX NUMBER (w/ AREA CODE)	FAX NUMBER (w/ AREA CODE)	FAX NUMBER (w/ AREA CODE)

BANK CREDIT REFERENCES

BANK _____ TELEPHONE NUMBER (w/ AREA CODE) _____
 BRANCH ADDRESS (Street, City, State, zip) _____
 CHECKING ACCOUNT NUMBER _____ LOAN ACCOUNT NUMBER _____

*If a Limited Liability Company, please complete the LLC Addendum as well

