



AGREEMENT AND APPLICATION

AGREEMENT made by and between FLORAMIX, INC. and

_____ (Personally and) on behalf _____

The undersigned hereby AGREES that:

FLORAMIX, INC. is a corporation duly organized in Massachusetts, with a principal location for doing business at 421 Paradise Road, ME 04217.

_____ is organized as a _____ corporation _____ partnership
_____ sole proprietorship, which has a principal location for doing business at

_____, _____
Company address

Telephone _____ Fax _____

If incorporated, under the state laws of _____ Since _____

Do you have another business within this trade ___ No ___ Yes /Name _____

This AGREEMENT is made in Bethel, ME and shall be enforceable under the Laws of the Commonwealth of Massachusetts in an appropriate court of the Commonwealth of Massachusetts.

The consideration for FLORAMIX, INC. is the extension of credit to

_____ For the purchase of flowers from FLORAMIX, INC.

Responsible Parties (Owner, Partners, Officer):

Name	Title	Home Address	Home Phone
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Accounts Payable Contact _____ Telephone _____

Sales Tax ID _____

BANK REFERENCE:

Name _____ Phone _____
Address _____ Fax _____
Acct No. _____

TRADE REFERENCES:

Trucking Firm

Name _____ phone _____
Address _____ Fax _____
Contact _____

Vendors

Name _____ Phone _____
Address _____ Fax _____
Contact _____

Name _____ Phone _____
Address _____ Fax _____
Contact _____

Name _____ Phone _____
Address _____ Fax _____
Contact _____

Person signing this application must be an owner, partner or officer.

In consideration for said credit by FLORAMIX, INC., the following terms and conditions are hereby agreed to (a) Unless otherwise agreed to by the parties in writing, prior to a purchase, all accounts shall be payable at the office of FLORAMIX, INC., P.O. Box 110, Bethel, ME 04217. Said payments are due on the day of shipment as shown on individual invoices. (b) A charge of 1.5% per month interest (18% per annum) shall be charged to all accounts thirty (30) days past due. (c) In the event that any account or accounts are placed in the hands of an attorney or collection agency or insurance company for the purpose of collecting past due accounts, the undersigned debtor/purchaser agrees to pay, in addition to the outstanding obligation, all reasonable attorney fees and costs incurred by FLORAMIX, INC. (d) The undersigned individual warrants that he/she has full authority to sign this AGREEMENT on behalf of the company, whether a sole proprietorship, partnership or corporation and that he/she has authority to legally bind such company. (e) The undersigned individual hereby authorizes the banks and other credit references to release to FLORAMIX, INC. all financial information requested.

Any person signing this agreement hereby certifies that he/she is an owner, partner or officer of

Signed under seal this _____ day of _____

Signature _____
Title: _____

The undersigned hereby agrees to personally warrant payment of all debts incurred by

_____ To FLORAMIX, INC.
Company Name

Signature _____

PROCEDURES FOR FLOWER CREDITS

1. All credit requests must be acknowledged within 48 hours after receiving the shipment.
2. All credit requests must be phoned in to your sales representative and the problem stated before obtaining a control number.
3. Written confirmation must follow immediately and the following information must be included:
 1. Control # and AWB # (found at end of box and in your invoice)
 2. Farm Name (found at end of the box and in your invoice)
 3. Invoice # and date
 4. Type of flower and quantity
 5. Reason for credit
 6. Unit value and total value of credit
4. All credit requests must be accompanied by photographs showing the damaged flowers, and a photo of the box showing the name of the farm.

To facilitate this procedure you may request a format from your salesperson.

The undersigned hereby agrees to the policies of FLORAMIX, INC.

Company Name

Signature_____