



# **FRCA**

**FIRST REGIONAL COMPOST AUTHORITY**

## **Credit Application and Agreement**

### **Business Information – Corporation**

Corporate Name \_\_\_\_\_

Fictitious Name \_\_\_\_\_

Business Address \_\_\_\_\_

Business Telephone No. \_\_\_\_\_

Length of Time at Business Address \_\_\_\_\_

Corporate Officers: President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary \_\_\_\_\_

Treasurer \_\_\_\_\_

Federal Employee ID No: \_\_\_\_\_

Date of Incorporation \_\_\_\_\_ State of Corporation \_\_\_\_\_

State and County of Fictitious Name Registration \_\_\_\_\_

Billing Address, if different \_\_\_\_\_

Email Address \_\_\_\_\_

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### **Business Information – Individual or Partnership**

Trade Name \_\_\_\_\_

Business Address \_\_\_\_\_

Business Telephone No. \_\_\_\_\_

Length of Time in Business \_\_\_\_\_

State and County of Fictitious Name Registration \_\_\_\_\_

Billing Address, if different \_\_\_\_\_

Length of Time at Business Address \_\_\_\_\_

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### **Credit Information – Trade References**

Bank \_\_\_\_\_ Branch Address \_\_\_\_\_

Branch Telephone No: \_\_\_\_\_ Account No: \_\_\_\_\_

Length of Time Doing Business with this Bank \_\_\_\_\_

Trade References \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Credit Information – Principals of Financial Responsibility (Officer, Partner or Owner)**

Name/Owner \_\_\_\_\_ Date of Birth \_\_\_\_\_  
SSN \_\_\_\_\_

Name/Owner \_\_\_\_\_ Date of Birth \_\_\_\_\_  
SSN \_\_\_\_\_

Name/Owner \_\_\_\_\_ Date of Birth \_\_\_\_\_  
SSN \_\_\_\_\_

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Parties agree that credit charges made are subject to the following terms and conditions:

1. The undersigned purchaser hereby agrees to the payment of all amounts due or accrued for dumping at First Regional Compost Authority site.
2. The undersigned hereby agrees that all amounts due First Regional Compost Authority are payable within agreed upon terms but not in excess of thirty (30) days unless authorized in writing. If any amount due FRCA is not paid within said period, delinquency charge of eighteen (18%) percent per annum will be added to the sum due.
3. A "Returned Check Fee" of \$30.00 will be imposed if ANY check is returned to the FRCA due to any "account closed" or for "insufficient funds".
4. The undersigned agrees to allow FRCA to obtain a consumer credit report for the sole purpose of credit scoring and credit evaluation.
5. The undersigned agrees to pay, in any event if the account becomes delinquent and is turned over to a collection agency/attorney for collection, fees equal to one-third of the balance whether or not suit is instituted and indemnifying FRCA for all expenses incurred with the collection of the amounts payable.
6. The undersigned agrees to notify FRCA by certified mail of any pending changes of ownership of the customer and further agrees to be liable for all purchases should the undersigned fail to comply with said notification. In the event that this guaranty is executed by more then one (1) person, then, in such event the liabilities and obligations of the undersigned hereunder shall be joint and several.
7. We hereby authorize FRCA to contact the references listed pertaining to credit and financial responsibility.

DATE: \_\_\_\_\_

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Printed Name and Title