CUSTOMER APPLICATION FORM

7927 NW 21ST STREET - DORAL, FL 33122

305.594.0123 PH

305.513.5933 FX

800.303.5745 TOLL FREE LINE

WWW.ISUNFLOWER.COM

contact@iSunflower.com

MEMBERS OF: MFICA



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COMPANY NAME					
DIVISION OF D/B/A OR	AKA				
EMAIL		SKYPE ID:		WEBSITE	
COMPANY ADDRESS					
CITY		STATE	<u> </u>	ZIP	
BUSINESS PH		FAX		HOME PH.	
BUYER CONTACT			P	PHONE	
DATE BUSINESS STAR	TED	UN	IDER PRESENT	OWNERSHIP SINCE	
HAVE YOU EVER FILE	FOR BANKRUPT	CY? YES COM	PANY NAME AN	ID YEAR?	
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FULL NAME		HOME ADD	RESS		
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CLAIMS POLICY / CREDIT PROCEDURES:

All Sales are FOB Miami and Sunflower Farms Distributors, Inc. accepts no liability for damage in transit. Title and ownership are passed from Sunflower Farms Distributors, Inc. to the buyer when the flowers are delivered to the customer's designated carrier.

Any credit request must be called in to your appropriate sales representative immediately and followed up in writing within 24 hours of receipt of product via fax to 305-513-5933. Sunflower Farms Distributors, Inc. is not responsible for any carrier related issues and is not responsible for processing any claims due to carrier related issues. Any problems between the customer and the carrier must be handled solely between both parties. If a problem is to arise with any shipment in regards to quality, the vendor holds the right to request pictures in order to begin the process of a credit. Customer cannot destroy or process any product without written consent from Sunflower Farms if a claim is being placed. Sunflower Farms reserves the right to request the product to be shipped back at company's expense in its original packing.

Claims are not automatic and their validity is thoroughly investigated prior to the approval by Sunflower Farms Distributors, Inc. management team.

Invoices WILL NOT be credited if customer has disposed of product without the approval of a Sunflower Farms Manager.

Under no circumstances will a claim be accepted unless it is in accordance with all the above requirements.

The undersigned agrees with the above requirements.

SIGNATURE PRINT NAME PRINT TITLE DATE

DECLARATION:

In making this application for credit, I/we hereby agree that all amounts are payable on or before the net due date as shown on each invoice. If not paid on or before set date, account will then be considered delinquent. Further, I/we agree to pay a delinquency charge of (18%) per annum calculated on a monthly basis, uncompounded, but not in excess of the lawful maximum rate of interest, on any amount which becomes past due more than 15 days from the net due date appearing on each invoice and thereafter on all such delinquent amounts until paid. If credit is granted, I/we agree to the above claim and terms policy. The undersigned is/are responsible for payment of the account. And in making this application for credit, I/we do further agree that if this account is placed in the hands of an attorney for collection or if collection is made through probate proceedings, to pay a reasonable amount in attorney's fees on both the principal and delinquency charge. Buyer hereby acknowledges jurisdiction of the courts of Dade county, state of Florida.

I authorize sunflower farms distributors, inc. To verify any and all references we have given that may be required to determine our credit capabilities and to request relevant information from credit reporting agencies.

SIGNATURE PRINT NAME PRINT TITLE DATE

PERSONAL GUARANTEE:

In consideration of any credit extended, I/we will individually and /or jointly guarantee full and prompt payment of all indebtedness by (customer's name):

incurred for merchandise furnished by sunflower farms distributors, inc. Plus delinquent charges and collection costs, where applicable.

SIGNATURE PRINT NAME PRINT TITLE DATE

SUNFLOWER FARMS CREDIT CARD AUTHORIZATION FORM

FORM MUST BE COMPLETED WITH COPIES OF CREDIT CARD AND LICENSE AND FAXED TO OUR SECURE LINE 305-513-5933

In order to process any future credit card orders properly we will need the authorized card holder to please fill out this form ONE TIME for every credit card on file. The card <u>MUST BE</u> a corporate card or owners card. Please make sure the copies are legible before sending. You may also send via email to jalcantara@isunflower.com.

Name on Credit C	ard:				
Credit Card Numl	oer #:				
Exp Date:	CVV 5	CVV Security # (in back of card)			
Visa 🔾	Master Card ○	American Express (Discover (
CREDIT CARD BI	LLING ADDRESS				
Address:					
City:	State: _	Zip:			
Phone:		Fax:			

By signing the above line you are authorizing Sunflower Farms to charge your credit card on any invoice placed by your company. You are also agreeing to our credit terms and conditions. Any credit request must be called in to your appropriate sales representative immediately and followed up in writing within 24 hours of receipt of product via fax to 305-513-5933. Sunflower Farms Distributors, Inc. is not responsible for any carrier related issues and is not responsible for processing any claims due to carrier related issues. Any problems between the customer and the carrier must be handled solely between both parties. If a problem is to arise with any shipment in regards to quality, the vendor holds the right to request pictures in order to begin the process of a credit. Customer cannot destroy or process any product without written consent from Sunflower Farms if a claim is being placed. Sunflower Farms reserves the right to request the product to be shipped back at company's expense in its original packing.

If copies of credit card and license are not legible or appear too dark please take a picture and email directly with this form completed to

jalcantara@isunflower.com

COPY OF **LICENSE**

Order cannot be processed without this

FRONT OF CREDIT CARD

Order cannot be processed without this

BACK OF CREDIT CARD

Order cannot be processed without this