

Bissett Nursery Corp.
Customer Information Form

Account # _____

By completing the top portion of this form, you will be placed in our customer file and added to our mailing list. **If you wish to purchase with a business check, the entire form must be completed before a check will be accepted. This is not a credit application. Please read and sign the second page.** Thank you.

Company Name _____

Street _____ P. O. Box _____

City _____ State _____ Zip _____

Telephone # _____ Fax # _____

Owner(s) _____

Type of Business _____

Referred By _____

E-mail Address _____

Name on License _____

Drivers License # _____ State _____

Social Security # _____ D/O/B _____

Home Address _____

City _____ State _____ Zip _____

Home Telephone # _____

Bank _____

Bank Address _____

Account # _____ Bank Phone _____

***** **FOR OFFICE USE ONLY** *****

Date _____ Changes to Acct _____ Date _____

Initials _____ Change of Address _____

Account # _____

New Customer _____

Check Info _____ Change of Phone _____

Category _____ Change of Name _____

PLEASE READ AND SIGN BELOW

In the event your check is returned, you may be sued under SECTION 11-104 of the General Obligations law to recover payment. If a judgement is rendered against you in court, it may include not only the original face amount of the check, but also additional liquidated damages, as follows:

--- If you had no account with the bank upon which the check was drawn, an additional sum which may be equivalent to twice the face amount of the check or seven hundred fifty dollars (\$750.00), whichever is less, or:

--- If you had insufficient funds on deposit with the bank upon which the check was drawn, an additional sum which may be equivalent to twice the face amount of the check or four hundred dollars (\$400.00), whichever is less.

**** There is a \$20.00 charge for all returned checks. ****

Signature of Responsible Officer _____

Title _____ Date _____



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