



2364 Riverside Road Watsonville, CA 95076  
Phone (831) 726-1330 Fax (831) 726-1334  
[www.camflor.com](http://www.camflor.com)

## Welcome!

We at Camflor, Inc, are excited about the opportunity to serve you and become your partner in the floral business. We look forward to a long and mutually beneficial relationship.

To establish an account with Camflor, Inc, all you need to do is complete, sign, initial and date all appropriate places in this application. If you are interested in paying with a Credit Card an Authorization Form must be completed as well. We will also need to get a copy of your Seller's Permit.

On behalf of Camflor, Inc. and its employees, I thank you for this opportunity and assure you that we will never compromise our commitment to provide you with quality products and service.



# CamFlor, Inc.

2364 Riverside Rd  
Watsonville, CA 95076  
Toll Free (888) 226-3567  
Direct Dial (831) 726-1330  
Fax (831) 726-1334

**We welcome your interest in doing business with our company!**

For your convenience and to serve you more efficiently and completely, we encourage establishment of an open account. All information submitted will be held in strictest confidence and used solely for reference purposes within our credit department. The extent to which this application is completed will assist us in determining the extent of your line of credit.

Legal Name \_\_\_\_\_ Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Company Name (D.B.A) \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Shipping Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Web Site \_\_\_\_\_

Legal Status: Proprietorship \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation \_\_\_\_\_

Year Established \_\_\_\_\_ Under Present Ownership since \_\_\_\_\_

Business Property: Owned \_\_\_\_\_ Leased \_\_\_\_\_ From \_\_\_\_\_

Type of Business: Retail \_\_\_\_\_ Wholesale \_\_\_\_\_

FED ID# \_\_\_\_\_ Estimated Monthly Purchases from CamFlor \_\_\_\_\_

Officer's /Owner's Name	Title	Social Security #	Telephone
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Trade References** (List suppliers from whom purchases are made on direct credit basis.)

Name	City & State	Telephone	Fax
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Purchaser. (Contact)  
Name \_\_\_\_\_ Telephone \_\_\_\_\_ Email \_\_\_\_\_

Accounts Payable Contact  
Name \_\_\_\_\_ Telephone \_\_\_\_\_ Email \_\_\_\_\_

Preferred Carrier: \_\_\_\_\_ Account # \_\_\_\_\_  
Alternate Carrier: \_\_\_\_\_ Account # \_\_\_\_\_

**Bank References**

Name & Branch \_\_\_\_\_ Account # \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Name of officer you deal with \_\_\_\_\_ Date Acct. Opened \_\_\_\_\_  
 Authorized Check Signature(s) \_\_\_\_\_

**TERMS:** All invoices due and payable net 15 days end of the month (date of statement) in which shipping occurs. Any balance is considered overdue if unpaid by next statement. 1 ½ % interest will be charged on all overdue balances. All conditions of sale are final and set forth by CamFlor, unless approved in writing by CamFlor. **SALES WILL BE SUSPENDED IF AN ACCOUNT HAS ANY BALANCE OVER 60 DAYS OR IF CREDIT LIMIT IS EXCEEDED.**

I/WE authorize (creditor) to make whatever credit inquiries it deems necessary in connection with this credit application or in the course of review or collection of any credit extended in reliance on the application. I/WE authorize and instruct any person or consumer reporting agency to compile and furnish to the lender any information it may have or obtain in response to such credit inquiries and agree that same shall remain your property whether or not credit is extended. All information set forth in this application is declared to be a true representation of facts for the purpose of obtaining the credit requested and any willful misrepresentation on this application could result in criminal action.

Signature: \_\_\_\_\_

**PERSONAL GUARANTEE:**

In consideration of any credit being extended we the undersigned do hereby personally guarantee the full and prompt payment of any and all indebtedness by: (Company Name) \_\_\_\_\_, including but not limited to, actual charges incurred for merchandise purchased. 1 ½ % finance charges on all past due balances, collection and or attorney fees (20-40%) , and court costs. The applicant also hereby acknowledges jurisdiction and venue of the courts of the State of California. This guarantee shall be continuing and the full agreement of the guarantor(s) and is not subject to any oral conditions or revocation until actual written notice has been received by CamFlor. If more than one guarantor executes this agreement, their liability is joint and several.

Individual  
Signature: \_\_\_\_\_

Social Security \_\_\_\_\_

Print  
Name \_\_\_\_\_

**TERMS AND CONDITIONS**

To induce CamFlor, Inc. to extend credit and sell flowers to \_\_\_\_\_, the undersigned agrees to the following terms and conditions.

**1. Payment Terms and Collection.** We agree to be bound by the terms and conditions for payment set forth on any invoice for goods. We agree that acceptance by us of any goods from CamFlor, Inc., will constitute acceptance by us of the terms of such invoice. If collection proceedings are necessary, indebtedness, including all principal and interest, attorney fees, (appellate if necessary) and cost for such proceeding will be due CamFlor.

**2. Freight.** All costs of freight and transportation, and all demurrage charges will be paid by you.

**3. Delivery.** Delivery of the goods by you to the carrier at the point of origin will constitute delivery of the goods to us and thereafter the shipment of the goods will be at your risk. All claims and allowances for damage to the goods incurred in transit must be filed against and presented to the carrier by you.

**4. Credit Claims.** To receive credit for any defective merchandise, you must call CamFlor, Inc. within 1 working day of receipt of shipment and notify sales person there is a problem. Please have the invoice available when you call. **WITHIN 5 DAYS YOU MUST BY PHONE FURNISH COMPLETE INFORMATION TO THE SALESMAN AS TO THE EXTENT OF THE CREDIT. YOU MUST BE PREPARED TO SHIP ANY MERCHANDISE BACK WHICH IS REQUESTED BY CamFlor, Inc. THE SAME DAY YOU REQUEST CREDIT. NO CREDIT WILL BE ISSUED IF THIS PROCEDURE IS NOT FOLLOWED AND UNDER NO CIRCUMSTANCES THE AMOUNT OF CREDIT CAN EXCEED THE AMOUNT OF THE ORIGINAL INVOICE.**

**5. Delays.** CamFlor will not be liable for delays in delivery of the goods or inability to deliver the goods caused by inability to obtain transportation, equipment or material or by fire, flood, action of any military authority, labor difficulties, acts of God or other circumstances beyond the control of CamFlor, Inc.

**6. Warranties.** In marketing the goods we will make available to our customers only literature, warranties and samples which have been furnished to us by you for such purpose of which have been expressly approved by you in writing. We will not make any other oral or written warranty or representation regarding the goods to our customers.

**7. Additional Terms.** Any exception to these terms must be requested in writing on our company letterhead and signed by an authorized officer.

**8. Governing Law.** The laws of the State of California will govern this instrument and all sales of goods by CamFlor, Inc. to us.

I HAVE READ, UNDERSTAND, AND ACCEPT THE ABOVE TERMS AND HAVE PROVIDED TRUE INFORMATION TO THE BEST OF MY KNOWLEDGE. I FURTHER AUTHORIZE **CamFlor, 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.

Applicant: \_\_\_\_\_  
(Signature & Title of Authorized Officer)

\_\_\_\_\_ Date

# RESALE CERTIFICATE

THE UNDERSIGNED HEREBY CERTIFIES: That I hold valid seller's permit No. \_\_\_\_\_  
issued pursuant to the Sales and Use Tax Law; that I am engaged in the business of selling \_\_\_\_\_;  
that the tangible personal property described herein which shall purchase from: \_\_\_\_\_

will be resold by me in the form of tangible personal property; provided, however, that in the event any of such property is used for any purpose other than retention, demonstration, or display while holding it for sale in the regular course of business, it is understood that I am required by Sales and Use Tax Law to report and pay tax, measured by the purchase price of such property or other authorized amount.

Description of property to be purchased:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

Name of Purchaser \_\_\_\_\_

By/Title: \_\_\_\_\_

Address of Purchaser: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_



# Camflor, Inc. Customer Credit Card Authorization

[www.CamFlor.com](http://www.CamFlor.com) P.O. Box 227 Aromas, CA 95004 (831) 726-1330, Fax (831) 726-1334 Toll Free 1888-Camflor

**Please fax back to 831-726-1334** In order to process any future credit card orders properly, I will need the authorized card holder to please fill out this form completely. It is required that you attach a copy of license along with a copy of credit card (front and back matching the license cardholder's name) and fax to 831-726-1334. We will need this completed and sent back to us before any orders can be shipped.

Company Name: \_\_\_\_\_  
Manager/Buyer: \_\_\_\_\_  
Billing Address: \_\_\_\_\_  
\_\_\_\_\_

Phone # : \_\_\_\_\_ Fax # \_\_\_\_\_

VISA \_\_\_\_\_ Mastercard \_\_\_\_\_ AMEX \_\_\_\_\_ Single transaction \_\_\_\_\_ Open \_\_\_\_\_

Payment for \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVV#(in back of card) \_\_\_\_\_

Cardholder Name: \_\_\_\_\_

Signature of authorized card holder: \_\_\_\_\_

By signing the above line you are authorizing Camflor, Inc/Special Events Floral Distribution 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 831-726-1334. CamFlor, 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 Camflor, Inc. if a claim is being placed. Camflor, Inc. reserves the right to request the product to be shipped back at company's expense in its original packing.

COPY OF DRIVER LICENSE OR ID CARD  
TO BE PLACED HERE  
  
ORDER CANNOT BE PROCESSED WITHOUT THIS

COPY OF FRONT OF CREDIT CARD TO  
BE PLACED HERE  
  
ORDER CANNOT BE PROCESSED WITHOUT THIS

COPY OF BACK OF CREDIT CARD TO BE  
PLACED HERE  
  
ORDER CANNOT BE PROCESSED WITHOUT THIS