

### Applicant

Business or Corporate Name: \_\_\_\_\_  
 Business Type:  Corporation  Partnership  Sole Proprietorship  
 Business Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_  
 Billing Address (Street or P.O. Box): \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_  
 Business Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Year Established: \_\_\_\_\_ Federal EIN: \_\_\_\_\_ Number of Employees: \_\_\_\_\_  
 Type of Business: \_\_\_\_\_

### Owners or Officers

1. Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 2. Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 3. Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

### Accounts Payable

AP Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_

### Bank or Loan Association

1. Name of Bank: \_\_\_\_\_  
 Branch Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax or E-mail: \_\_\_\_\_  
 Account Number: \_\_\_\_\_ Account Type: \_\_\_\_\_  
 Year Activated: \_\_\_\_\_ Average Balance: \$ \_\_\_\_\_  
 2. Name of Bank: \_\_\_\_\_  
 Branch Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax or E-mail: \_\_\_\_\_  
 Account Number: \_\_\_\_\_ Account Type: \_\_\_\_\_  
 Year Activated: \_\_\_\_\_ Average Balance: \$ \_\_\_\_\_

### Applicant's Principal Credit References (Please list 3 references excluding credit card companies.)

1. Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Years Active: \_\_\_\_\_ Credit Limit: \$ \_\_\_\_\_ Average Balance: \$ \_\_\_\_\_  
 2. Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Years Active: \_\_\_\_\_ Credit Limit: \$ \_\_\_\_\_ Average Balance: \$ \_\_\_\_\_  
 3. Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Years Active: \_\_\_\_\_ Credit Limit: \$ \_\_\_\_\_ Average Balance: \$ \_\_\_\_\_

Has Applicant or any of its Owners, Principals, Partners, Officers, or Directors ever filed a voluntary petition in bankruptcy, been adjudged bankrupt, or made an assignment for the benefit of creditors?

YES  NO

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does applicant owe any overdue taxes?

YES  NO

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**AGREEMENT:**

In consideration of groSolar (Seller) extending credit to the Applicant, Applicant agrees to pay for all items delivered to or at the request of Applicant within 30 days of the purchase unless other terms are explicitly agreed to in writing by Seller. The service charge shall be 2% per month, or the highest allowed by law, whichever is lower. The Applicant further agrees that with regard to such service charges, Applicant and Seller are parties to a written contract. If Seller commences collection activities, litigation, or employs attorneys in order to secure payment or status of ownership, Applicant further agrees that all additional charges incurred will remain the responsibility of Applicant unless agreed to by Seller in writing. The undersigned warrants that the above agreement has been carefully read and that Applicant understands the same.

This agreement is bound by groSolar's standard Terms and Conditions in effect at the time of the sale, which supersedes any other agreement.

Name of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signed by: \_\_\_\_\_

Business Office Contact: groSolar  
205 Billings Farm Road, Bldg. 4  
White River Junction, VT 05001  
Phone: 802.295.4415  
Fax: 802.295.4417  
accounting@grosolar.com