Lenoir County
SOLID WASTE DEPARTMENT

2949 Hodges Farm Road
La Grange, NC 28551
Phone 252 566-4194

CREDIT APPLICATION

Company Name: _____

Mailing Address: _____

City: _____State: _____Zip: _____

Email: _____Phone: _____Cell: _____Fax: _____

Owner Name: _____

Tax ID: _____SSN#_____

Type of Business: _____ Estimated Monthly Tonnage: _____

Date Business Commenced: _____

Number of Trucks to access Landfill: _____ Make and Model: _____

Preferred method of Invoicing: Mail Email

Accounts Payable Contact: _____

Phone: _____ Email: _____

Bank of Financial Institution: _____

Address: _____

Phone: _____ Checking Savings Loan Account#: _____

TRADE REFERENCES (3)

Firm Name	Address	Phone	Email

TERM AND CONDITIONS

- The Social Security number of the account holder, and the Corporate EIN if applicable, will be used in accordance with North Carolina General Statues §132-1.10 and §105A-3, the Debt Setoff Clearinghouse Program, for the purpose of garnishment should a debt become delinquent. If the Social Security number or Corporate EIN is not provided an account will not be opened.
- Payment Terms: Your account is due in full monthly, by the 25th of the month.
- By submitting this application, you authorize Lenoir County to make inquiries into the banking and trade references you have supplied.

We accept Lenoir County Landfill's terms and conditions above:

Printed Name: _____ Title: _____

Signature: _____ Date: _____

OFFICE USE

Account #: _____ Credit Limit: _____