

Please return completed form to:
Wilson Nurseries, 43W967 State Route 72, Hampshire Illinois 60140-8271
To expedite, please fax to (847) 683-3977
ORIGINAL FORM MUST BE MAILED.

BANK AUTHORIZATION

(Please list only one Financial Institution per form; call if you need additional copies)

FINANCIAL INFORMATION REGARDING ACCOUNTS HELD AT: _____
(Bank Name)

(Bank Fax Number)

Re: _____

Our company has applied for credit with Wilson Nurseries, Incorporated. I hereby authorize the release of the following information on behalf of the above named company.

Applicant's signature

TO BE COMPLETED BY APPLICANT

Business CHECKING
account number(s):

Business LOAN
account number(s):

TO BE COMPLETED BY BANK ONLY

Date Checking Account Opened:

Average Monthly Balance:

Experience:

Satisfactory Unsatisfactory

Insufficient Experience

Number of overdrafts in last 6 months:

Business Loans:

Secured Balance

Unsecured Balance

Line of Credit available

Relationship Manager

Cut along dotted line to mail.

Thank you for providing Wilson Landscape Supply with this information.