

DOW CAIDE

FOODSERVICE

PO Box 381462

Duncanville TX 75138

Phone: (972) 421-8662

Fax: (972) 296-4115

Credit Application

Salesperson: _____

The Company

Legal Company Name: _____ DBA: _____

Complete **Billing** Address: _____

City _____ State _____ Zip _____

Complete **SHIP TO/DELIVERY** Address: _____

City _____ State _____ Zip _____

Telephone: _____ Fax: _____

Email Address: _____

Corporation: ___ Partnership: ___ LLC: ___ Proprietorship: ___ Federal ID# (FEIN): _____

Sales Tax #: _____ Month/Year Business Established: _____

Terms requested: _____ Estimated purchases per week: _____

Owners/Principals

Name: _____ Title: _____

Home Address/Phone: _____

Name: _____ Title: _____

Home Address/Phone: _____

Facility/Property Information

Own Property ___ Lease Property ___

Lender/Lessor Name & Phone Number: _____

Bank Checking Information

Bank Name: _____ Account Officer: _____

Phone: _____ Fax: _____

Checking Account #: _____

Is there more than one checking account? _____

Bank Loan Information

Bank Name: _____ Account Officer: _____

Phone: _____ Fax: _____

Loan Account #: _____

Type of loan or Line of Credit: _____

Trade References (Major Suppliers)

Name: _____ City/State: _____

Telephone: _____

Name: _____ City/State: _____

Telephone: _____

Terms, Conditions, Authorizations:

By execution of this instrument, buyer ratifies and agrees to the following terms. In the event there is a default in payment of any invoice, a late charge will be imposed in the amount of 1.5% per month of the unpaid balance. In the event any suit or proceeding is required to effect the collection of any amount due, buyer agrees to pay all of Dow Caide Foods reasonable attorney fees and/or collection service fees incurred in the course of such collection efforts. Buyer authorizes agents of Dow Caide Foods to make sure credit investigations as necessary, including connecting the above trade references and banks and/or obtaining credit reports. Buyer authorizes all trade references, banks and credit reporting agencies to disclose to Dow Caide Foods and its authorized agents, any and all information concerning the financial and credit history of my company and myself.

Printed Name: _____

SS#: _____

Signature: _____ Date: _____

Personal Guarantee:

For value received and in order to induce Dow Caide Foods to extend credit to the above named account, I the undersigned, hereby personally guarantee prompt and full payment when due of any and all debts to Dow Caide Foods arising out of sales or advances by Dow Caide Foods to the above named account, including late charges, attorney's fees and disbursements. This is a continuing guarantee and can not be revoked under any circumstances. Notice of Acceptance of this guarantee is waived. Use of corporate titles shall in no way limit the liability of the signatory. This is an absolute and continuing unconditional guarantee of payment.

Printed Name: _____

SS#: _____

Signature: _____ Date: _____

Once completed please print, sign, and email to info@dowcaidefoods.com