

South Jersey Beverage
P O Box 633
Berlin, NJ 08009
Phone: (856) 292-6868 Fax: (215) 609-4176

Credit Application

The undersigned company is applying for credit with South Jersey Beverage and agrees to abide by The standard terms and conditions of South Jersey Beverage as printed on the reverse side.

Company Name

DBA (if different)

Contact Person

Address

Phone _____ Fax _____

Federal Tax ID or Social Security Number

Type of Business _____ Number of Employees _____

Date Business Established

Types of Products You Will Purchase

Amount of Credit Requested

Name and home addresses of owners and person(s) responsible for payment:

Are you a:
 Corporation LLC S-Corp Non-Profit LLP/LP Municipal
State of Incorporation _____

Names, titles, and addresses of your three chief corporate officers:

Partnership
Names and addresses of the partners:

Sole Proprietorship
Are you sales tax exempt? yes no
Have you ever had credit with us before? yes no
If yes, under what name? _____

Authorized Purchasers: _____
Purchase order required? yes no

TRADE REFERENCES

Reference #1	<u>Name</u>	<u>Account #</u>
	<u>Address</u>	
	<u>Phone</u>	<u>Fax</u>
Reference #2	<u>Name</u>	<u>Account #</u>
	<u>Address</u>	
	<u>Phone</u>	<u>Fax</u>
Reference #3	<u>Name</u>	<u>Account #</u>
	<u>Address</u>	
	<u>Phone</u>	<u>Fax</u>

BANK REFERENCES

Bank #1	<u>Account #</u>
	<u>Phone</u>
	<u>Contact Person</u>
	<u>Name of Bank</u>
	<u>Address</u>
Bank #2	<u>Account #</u>
	<u>Phone</u>
	<u>Contact Person</u>
	<u>Name of Bank</u>
	<u>Address</u>

I represent that the above information is true and is given to induce South Jersey Beverage to extend credit to the applicant. My company and I authorize South Jersey Beverage to make such credit investigation as South Jersey Beverage sees fit, including contacting the above trade references and banks and obtaining credit reports. My company and I authorize all trade references, banks, and credit reporting agencies to disclose to South Jersey Beverage any and all information concerning the financial and credit history of my company and myself.

Authorized Signature: _____
Printed Name: _____
Title: _____ Date: _____

GENERAL TERMS AND CONDITIONS AND PERSONAL GUARANTEE

1. A service charge of 1.5% per month will be added to all amounts billed if not paid by the end of the month that product was purchased.
2. No additional credit will be extended to past due accounts unless satisfactory arrangements are made with our credit department.
3. **PERSONAL GUARANTEE:** If the credit customer is a corporation, then those signing this application, whether signing as an officer or not, personally guarantee payment for all terms purchased on credit by the corporation.

I have read the terms and conditions stated above and agree to all of these terms and conditions

Authorized Signature: _____
Printed Name: _____
Title: _____ Date: _____