

Credit Application

The undersigned company is applying for credit with Berry Fit Company, llc and agrees to abide by the standard terms and conditions of Berry Fit Company, llc as printed on the last page.

Company name _____

DBA (if different) _____

Contact person _____

Address _____

Phone _____ **Fax** _____

Federal tax ID or Social Security number. _____

Type of business _____ **No. of employees** _____

Date business established _____

Types of products you will purchase _____

Amount of credit requested \$ _____

Are you a:
 CORPORATION
State of incorporation _____

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

Name and address of your resident agent

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 **Name** _____
 Address _____
 Phone _____

Reference #2 **Name** _____
 Address _____
 Phone _____

Reference #3 **Name** _____
 Address _____
 Phone _____

BANK REFERENCES

Bank#1 **Account #** _____
 Phone _____
 Contact person _____
 Name of bank _____
 Address _____

Bank#2 **Account #** _____
 Phone _____
 Contact person _____
 Name of bank _____
 Address _____

I represent that the above information is true and is given to induce Berry Fit Company, llc to extend credit to the applicant. My company and I authorize Berry Fit Company, llc to make such credit investigation as Berry Fit Company, llc 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 Berry Fit Company, llc any and all information concerning the financial and credit history of my company and myself.

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

Authorized signature: _____

Printed name: _____

Title: _____ **Date:** _____

GENERAL TERMS AND CONDITIONS AND PERSONAL GUARANTEE

1. **Bills are sent on the first day of each month. You may take the 5% discount as indicated on the bill if you pay the invoice by the 10th of the month.**
2. **All bills become payable in full on the 11th day of the month and if not paid by the end of the month are considered past due.**
3. **A service charge of 2% per month will be added to all amounts billed if not paid by the end of the month.**
4. **No additional credit will be extended to past due accounts unless satisfactory arrangements are made with our credit department.**
5. **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 items purchased on credit by the corporation.**