



14455 Industry Circle La Mirada, CA 90670

562-483-7337
562-483-7344 Fax

APPLICATION FOR CREDIT

VCS Salesman: _____

To be completed by applicant and original returned to Vend Catering Supply Inc. To help expedite the approval process, please complete all areas of this application.

Credit Line Requested: _____ Terms Requested: _____

PLEASE TYPE or PRINT LEGIBLY

Name of Business-Parent Company: _____

Name of Business-DBA: _____

Years in Business: _____

Billing Address: _____

Ship To Address: _____

Business Phone: () _____ Fax Number: () _____

E-Mail: _____ Web Site: _____

Sole Proprietor: _____ Partnership: _____ LLC: _____ Corporation: _____

Social Security #: _____ Federal Id #: _____ Resale Number: _____

Type of Business Operated:

Vending: _____ Wholesale: _____ Catering: _____ Other (specify): _____

Accounts Payable Contact: _____ Phone Number: _____

Buyer Contact: _____ Phone Number: _____

Have you ever declared Bankruptcy? Yes: _____ No: _____

If yes, please give name filed under, where, and when: _____

Applicant's authorization for credit check (agreement of terms and conditions must be signed)

In support of this application and in connection with this agreement, Vend Catering Supply Inc. ("Vend") is hereby authorized to obtain credit and/or financial information from my/our bank(s), and other financial institutions or commercial firms with whom I/we have done business. It is understood that any such credit and/or financial information will be held in strict confidence and be used only in connection with this application and agreement.

Authorized Signature: _____ Date: _____

OWNERSHIP: (List all partners or principals separately. Additional forms may be requested.)

Name of Owner or Principal _____

Residential Address _____

City: _____ State: _____ Zip: _____

Residential Phone: () _____ Own or Rent? _____

Title: _____ Date of Birth: _____

Social Security Number ____ - ____ - ____ Drivers Lic. Number _____

Name of Owner or Principal _____

Residential Address _____

City: _____ State: _____ Zip: _____

Residential Phone: () _____ Own or Rent? _____

Title: _____ Date of Birth: _____

Social Security Number ____ - ____ - ____ Drivers Lic. Number _____

(Attach additional sheet if necessary)

BANK INFORMATION:

Name of Bank _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone: () _____ Fax Number (if any) () _____

Type of account: Checking _____ Savings _____ Other _____

Business Account Number _____

Contact Person _____ Years at this Bank _____

TRADE REFERENCES: List at least four (4) business references with whom you have charge terms. COD accounts are not applicable.

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone: () _____ Fax Number (if any) () _____

Account Number _____ Contact Person _____

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone: () _____ Fax Number (if any) () _____

Account Number _____ Contact Person _____

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone: () _____ Fax Number (if any) () _____

Account Number _____ Contact Person _____

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone: () _____ Fax Number (if any) () _____

Account Number _____ Contact Person _____



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APPLICANT'S AGREEMENT TO TERMS AND CONDITION OF OPEN ACCOUNT

Upon approval of this application, it is agreed that all purchases will be paid in full and in accordance with the terms of sale as stated on Vend Catering Supply Inc. Invoice(s). Additionally, the terms of this agreement shall be deemed a material part of any purchase made with Vend. I/we agree to pay a finance charge at the rate of 1½% per month (or such other rate as allowable by state law), on any amounts not paid within 30 days. In the event that legal action is instituted to enforce this agreement or by Vend to collect any sums owing Vend, the Applicant agrees that proper venue for any such action shall be in the courts of Orange County, California. In the event Vend institutes any action to collect any past due balances, the undersigned also agrees to pay all costs and attorney fees incurred including collection fees and/or court costs allowable by law.

It is understood and agreed that this application and agreement are subject to the acceptance of Vend, at its principal office located in Los Angeles, California. Upon such acceptance by Vend, this application shall become part of the agreement between the Applicant and Vend. All payments due shall, unless otherwise agreed in writing by Vend, be made in Los Angeles, California.

The Applicant (an officer, partner, or principal) has been duly authorized to enter into this agreement with Vend and has the actual authority to enter into this application and agreement on behalf of the Applicant.

AUTHORIZED SIGNATURE: _____

TITLE: _____ DATE: _____

PERSONAL GUARANTY

The undersigned ("Guarantor") personally unconditionally guarantees the full performance of all the foregoing obligations of Applicant. This guaranty may not be waived in writing. Guarantor Waives any right to require Vend to proceed against Applicant or to exhaust any remedy in its power before proceeding against Applicant and waives any right that Guarantor be given notice of demands to Applicant.

SIGNATURE: _____ DATE: _____

PRINTED NAME: _____ TITLE: _____

DATE OF BIRTH: _____

IF PURCHASES ARE FOR RESALE, PLEASE COMPLETE THE RESALE CARD BELOW

California Resale Certificate

I HEREBY CERTIFY:

1. I hold valid seller's permit number: _____

2. I am engaged in the business of selling the following type of tangible personal property:

3. This certificate is for the purchase from _____ of the item(s) I have listed in paragraph 5 below. (Vendor's name)

4. I will resell the item(s) listed in paragraph 5, which I am purchasing under this resale certificate in the form of tangible personal property in the regular course of my business operations, and I will do so prior to making any use of the item(s) other than demonstration and display while holding the item(s) for sale in the regular course of my business. I understand that if I use the item(s) purchased under this certificate in any manner other than as just described, I will owe use tax based on each item's purchase price or as otherwise provided by law.

5. Description of property to be purchased for resale:

6. I have read and understand the following:

For Your Information: A person may be guilty of a misdemeanor under Revenue and Taxation Code section 6094.5 if the purchaser knows at the time of purchase that he or she will not resell the purchased item prior to any use (other than retention, demonstration, or display while holding it for resale) and he or she furnishes a resale certificate to avoid payment to the seller of an amount as tax. Additionally, a person misusing a resale certificate for personal gain or to evade the payment of tax is liable, for each purchase, for the tax that would have been due, plus a penalty of 10 percent of the tax or \$500, whichever is more.

NAME OF PURCHASER

SIGNATURE OF PURCHASER, PURCHASER'S EMPLOYEE OR AUTHORIZED REPRESENTATIVE

PRINTED NAME OF PERSON SIGNING

TITLE

ADDRESS OF PURCHASER

TELEPHONE NUMBER
()

DATE