**QUALITY PROVISIONS LLC**

1935 Swarthmore Ave

Lakewood, NJ, 08701

P:732-901-2343, F: 732-901-2347

**CREDIT APPLICATION**

COMPANY INFORMATION

**Full Legal Business Name Or Doing Business As:**

Address: State: Zip:

Phone #: Fax #:

Billing Address (if different)

City: State: Zip:

Main Contact:

Accounts Payable Contact: Tel:

Federal Tax No. (attach copy of ST form)

**Owner / Partner/ Principal Information**

**Owner: Partner: Principal Name: (Print)**

Address:

City: State: Zip:

Home Phone: S.S. #

**Business / Trade References**

Name: Acct#:

Address:

City: State: Zip:

Name: Acct#:

Address:

City: State: Zip:

**BANKING INFORMATION**

Bank Name:

Branch: Acct. #:

Name/Title Check Signer:

Phone #: Fax #:

**BANK AUTHORIZATION**

For the purpose for establishing an open credit account with Quality Provisions LLC, we hereby authorize you to release information on our

Checking Account #:

Company:

Signed :( authorized signer) Date:

**CREDIT AGREEMENT /GUARANTY**

**FULL LEGAL BUSINESS NAME, D/B/A**

This agreement shall apply to future credit (if any) and to existing indebtedness owed to Quality Provisions LLC. Quality Provisions is hereby authorized to make inquiry of our bank and trade referenced now and in the future to evaluate and update our credit worthiness. We agree to abide by the credit terms of Quality Provisions as established and amended from time to time. In the event we do not comply with those terms, we agree to pay, in addition to the principal debt, interest at 18% per annum, plus all cost of suit. In the event that we sell, transfer or change the ownership or legal structure of our business, we agree to provide written notice thereof delivered to Quality Provisions, which notice must be actually received. Until we provide such notice, we agree to be liable for all purchase made on the account established in our name.

By: Date:

(Print Name) Title:

**If a Sole Proprietor / Partnership, the following must also be signed:**

The Undersigned, having a financial or other interest in the above named business, does unconditionally, personally and individually guaranty payment of all amount owed to Quality Provisions LLC by the above named business, including interests, costs and attorney fees. I/We Specifically agree to the venue provisions set forth above. This guaranty shall be continuing and may not be cancelled except by written notice actually received at Quality Provisions LLC.

**Signature of Guarantor:**

(Print Name) Date:

Signature of Guarantor:

(Print Name): Date:

PLEASE ATTACH A COPY OF YOUR PHOTO ID , THANK YOU