



Retailer Credit Application Form

A. GENERAL INFORMATION

Business/Corporate Name:

Business Street Address:

Mailing Address (if different than Business Address):

Is there another party (i.e., Parent company) that will guarantee your financial obligation? (if yes, complete Part G to L)

Chief Executive Officer:

Name

Phone #

Fax #

Chief Financial Officer

Name

Phone #

Fax #

Is your Company publicly traded? (if yes, provide Fiscal Year End (Month/Day); (if no, complete next question)

Primary/Alternate Contact Person Information to provide Financial Statements:

Name(s)

Address

Phone #

Email

Fax #

B. CREDIT INFORMATION

Dun & Bradstreet Number

Credit Rating Agency

Name(s) _____

Address _____

Phone # _____

Email _____

Fax # _____

What is the initial estimated distribution wires charges for a 60 day period

D. FINANCIAL INFORMATION

Two years Annual Report and audited Financial Statements

Current quarterly financial statements

E. BANKING INFORMATION

Name of Bank, branch, and name of bank representative

F. TRADE REFERENCES (3)

<u>Name</u>	<u>Contact</u>	<u>Phone</u>	<u>Fax</u>
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G. CORPORATE ISSUER

Business/Corporate Name:

Doing Business As (DBA) Name:

Business Street Address:

Mailing Address (if different than Business Address):

H. CORPORATE ISSUER (con't)

Chief Financial Officer:

Name

Phone #

Fax #

Is your Company publicly traded? (if yes, Fiscal Year End (Month/Day); (If no, complete next question)

Primary/Alternate Contact Person Information to provide Financial Statements:

Name(s)

Address

Phone #

Email

Fax #

I. CREDIT INFORMATION

Dun & Bradstreet Number

Credit Rating Agency

Name(s)

Address

Phone #

Email

Fax #

What is the initial estimated distribution wires charges for a 60-day period:

J. FINANCIAL INFORMATION

Two years Annual Report and audited Financial Statements

Current quarterly financial statements

K. BANKING INFORMATION

Name of Bank, branch, and name of bank representative

L. TRADE REFERENCES (3)

<u>Name</u>	<u>Contact</u>	<u>Phone</u>	<u>Fax</u>

INTERNAL USE ONLY

Approved by: _____

Date: _____

Printed Name: _____