

Credit Application

(Please Print or Type)

| Office Use Only | | | | | | | |
|-----------------|--|---------|--|--|--|--|--|
| New | | Update | | | | | |
| Sales | | Route 1 | | | | | |
| Acct | | Route 2 | | | | | |

| Trade Name or [| DBA: | | | | | | | | |
|--------------------------------|---------------|-------------|------------|--------------|-------------|--------------|--------------|------------------|-------------|
| Corp | porate Nam | ie: | | | | | | | |
| Current Address: | : | | | | | | | | |
| City: | | State: Zip: | | | Phone: | | | | |
| Mailing Address | (If Different | :): | | • | | | | • | |
| E-mail Address: | | | | | | | | | |
| CHEC | CK ONE: | LLC | | Proprietorsh | nip | Corporation | | State Organized: | |
| Sale | es Tax ID: | | | DUNS #: | | | Federal ID # | ! : | |
| Type of Busine | ess (eg Res | taurant | , Grocery) | | | | | | |
| PRIMARY OWNE | | | | OFFICERS | | | | | |
| Name: | | | | | | Title: | | | |
| Phone: | | City: | | | State: Zip: | | | | |
| | | | | • | | • | | | |
| Name: | | | | | | | Title: | | |
| Phone: | | | | City: | | | State: | Zip: | |
| | | | | • | | • | | • | |
| Accounts Payable Contact Name: | | | | | | Phone | | | |
| Buyer or Primary Contact | | | | | | Phone/E-mail | | | |
| | | | | BAI | NK REFERE | NCE | | | |
| Bank Name | | | Acct. # | | | Phone | | | |
| Bank Officer or Contact | | | | Address | | | • | | |
| | | | | TRAI | DE REFERE | NCES | | | |
| Name | | | | Address | | | | | |
| Contact Name | | | | Phone | | | E-mail | | |
| | | | | | | | | | |
| Name | | | | Address | | | | | |
| Contact Name | | Phone | | | E-mail | | | | |
| | | | | | | <u> </u> | | | |
| Name | | | | Address | | | | | |
| Contact Name | | | | Phone | | | E-mail | | |

Payment Terms:

I authorize you to obtain credit and/or financial information from our bank(s), consumer credit and commercial credit reporting agencies and other commercial firms we have done business with. It is understood that any such credit and/or financial information will be held in strict confidence and used only in consideration of this application. We warrant that this information provided on this application to be true and accurate

The total invoice indebtedness is currently payable immediately upon delivery. If credit is extended to us base upon these representations we agree to pay any obligations due in accordance with the terms established by Quality Meats & Seafood. If for any reason the account is not paid when due and collection efforts are required, I agree to pay reasonable attorney's fees and any interest charges due. I understand that by signing this application, I agree to personally guarantee payment of any or all debt incurred by the application to Quality Meats & Seafood. This agreement shall be governed by the laws of North Dakota. I consent to the jurisdiction of the courts of Cass County, North Dakota and expressly waive any objection that such courts would be inconvenient.

| Authorized Signature | Title |
|----------------------|-------|
| Print Name | Date |