DAIRY DELIVERY

10029 Minnesota Ave. Penngrove, CA 94951 707 796 7900 Fax 707 664 8601

Email: dairydelivery@dairy-delivery.com

Please complete all information, sign and return to Dairy Delivery. If you want to attach other credit information, please feel free to do so. *PROVIDE FAX NUMBERS FOR CREDIT REFERENCE!!!*PLEASE ALLOW TWO WEEKS FOR CREDIT INFORMATION TO PROCESSED AND POSSIBLE DELIVERY DAYS TO BE ESTALISHED.

Account Information:				
Name:		Phone:		
Address:		Fax:		
		Email Address:		
		Website:		
		Type of Ownership: Limited Partner Corporation		
		General Partner Individual		
Legal Owner:		Tax ID#		
Years this company has been in business:		Years you have owned this business:		
Previous Dairy Purveyor:		Accounting Contact:		
		Phone:	Phone: Fax:	
	T			
Owners/Partners/Principals:				
1.	Home Address:		Home Phone:	
SSC #			Home Fax:	
2.	Home Address:		Home Phone:	
SSC #			Home Fax:	
3.	Home Address:		Home Phone:	
SSC #			Home Fax:	
	T			
Lease/Landlord Information:				
Name:	Tenants Since:		Lease Expires:	
Address:				
Phone:				
		Г		
Bank Information:				
Name:		Phone:		
Address:				
		Account #		
T 1 D C	I			
Trade References:			71	
1. Account Name:	Contact:		Phone:	
Address:	Terms:		Fax:	

	Credit Limit:	Yrs Doing Business with:		
2. Account Name: Address:	Contact: Terms: Credit Limit:	Phone: Fax: Yrs Doing Business with:		
3. Account Name: Address:	Contact: Terms: Credit Limit:	Phone: Fax: Yrs Doing Business with:		
The above information is given as a base to establish credit and is complete and accurate in all respects. I/We the authorized Dairy Delivery to verify the credit references above. We understand that our credit terms may depend on whether or not the companies we refer you to respond in a timely fashion. I/We understand that Dairy Delivery reserves the right to terminate any credit agreement if our account is not kept at its current agreed terms at all times.				
Signed:	Dated:			
Please Print Full Name:				
The personal guarantee below must be completed and signed by an owner or someone responsible for the financials of the account in order for any terms other than C.O.D. to be extended.				
PERSONAL GUARANTEE INFORMATION In exchange for terms of credit, the undersigned individual or individuals personally guarantee payment of any and all amounts of our company's bills, past, present or future. If this is not capable by means of the business, the undersigned owner/financial advisor will personally take care of the outstanding balance:				
Signature of Guarantor (s):				
Printed Name (s):				
Position (s):				
Home address (s):				
Phone (s):				
Dated:				