

**CREDIT
APPLICATION
2010**



TASTE Operating Inc.
 dba TASTE Specialty Foods
 3945 W. Reno Ave., #E, Las Vegas, NV 89118
 Phone: 702.733.6789 • Fax: 702.434.6772
 website: www.tastefoods.com

The undersigned company is applying for credit with, and agrees to abide by, the standard terms and conditions, as printed on the following page. **Please fax your response to 702.434.6772.**

S H I P T O	Company Legal Name	Accounts Payable/ Bill To:	Date
	Account Trade Name		Sales Representative Name
	Corporate Name or Owner's Name	Name of person to contact concerning payment	
	Address	Address	
	City, State, Zip	City, State, Zip	
	Phone Number (include area code)	Phone Number (include area code)	
	Fax Number (include area code)	E-mail address: _____	

Business Facts

[] Sole Proprietorship [] Partnership [] Corporation under state of _____ Federal ID# _____	
Length of time in business years: _____	Type of business
Types of products you will purchase	
Estimated Weekly purchases:	Amount of credit requested:
Authorized Purchasers:	
Purchase Order Number required?	

Have you claimed bankruptcy in the last five (5) years? _____ Have you conducted business under a different business name before? _____

Please complete the following for all corporate officers, owners, partners or an individual proprietor

Name and Title
Social Security Number
Home Address
City, State, Zip
Home Phone #

Name and Title
Social Security Number
Home Address
City, State, Zip
Home Phone #

Banking (Business)

Bank Name
Address
City, State, Zip
Account #
Phone and Fax Number

Bank Name
Address
City, State, Zip
Account #
Phone and Fax Number

Trade References

Name
Address
City, State, Zip
Phone and Fax number
Account # / Length of time purchased

Name
Address
City, State, Zip
Phone and Fax Number
Account # / Length of time purchased

I represent that the above information is true and is given to induce to extend credit to the applicant. My company and I authorize to make such credit investigation as needed, including contacting the above trade references and banks and obtaining credit reports. My company and I authorize all trade references, banks and credit reporting agencies to disclose any and all information concerning the financial and credit history of my company and myself.

I have read the terms and conditions stated below and agree to all of these terms and conditions. The undersigned agrees to pay all invoices when due within the terms as stated on the invoice. The undersigned agrees to pay a late service charge on the past due amounts. In the event it is necessary to incur collection costs or to institute suit to collect this amount, the undersigned agrees to pay an additional 25% of the total debt due TASTE Specialty Foods to cover the expenses of the collection agency and/or attorney's fees.

Authorized Signature _____ Date _____

Printed Name _____ Title _____

GENERAL TERMS AND CONDITIONS

1. A service charge of 2% per month will be added to all amounts billed if not paid within the terms of the invoice.
2. No additional credit will be extended to past due accounts unless prior satisfactory arrangements have been made.
3. Personal Guarantee: If the credit customer is a corporation, then those signing this application, whether signing as an officer or not, personally guarantee payment for all items purchased on credit by the corporation.