

# winemaker inc.

industries | ingredients | international

## CREDIT APPLICATION

Date: .....

Legal Name of Business: ..... Since: .....

Operating Trade Name: .....

Legal Entity: Corporation  Partnership  Sole Proprietorship

President/Owner ..... Date of Birth: .....

Home Address: ..... PC/Zip: ..... Telephone: ( ) .....

### Type of Business

Distributor  Retail  Other  Internet

Mailing Address ..... City ..... PV: ..... PC: .....

Shipping Address ..... City ..... PV: ..... PC: .....

Bus.Tel: ( ) ..... Bus.Fax: ( ) ..... Email .....

Business Tax No: ..... Manager: .....

Bank: ..... Contact Name: .....

Address: ..... City: ..... PV/State: ..... PC/Zip .....

### Trade References: (Name, City, Telephone, Fax, Contact Name)

1. ....

2. ....

I/We hereby authorize our bank and suppliers to release any necessary information required to establish a line of credit.

I/We am/are responsible for any and all debts incurred by the above named business. Failure on the part of the applicant to comply with payment terms will be considered sufficient cause to cancel credit account without notice.

Applicant agrees to the following terms: Distributor: NET 30; Retailer: 2% 15 NET 30, subject to a 2% interest charge per month (24% per annum) on overdue accounts. Customer agrees to pay all collection costs, including court costs and collection fees.

President / Owner Signature only: ..... Title .....

Requested Monthly Credit: .....

We require a minimum \$100.00 order to open an account. Opening order must be paid by cash, bank draft, Visa or Master Card. The initial 3 orders must be prepaid and the 2% early payment applies only to cash or bank drafts.

I/We authorize our order(s) to be charged to Visa or Master Card No: ..... Expiry: .....

Cardholder's Name: ..... Cardholder's Signature: .....

*Please Note: Credit is not available to retailers outside Atlantic Canada.*

### OFFICE USE ONLY

Account No: ..... Credit Limit: .....

Bank/Credit Agency Comments: .....

Date Approved: ..... Approved By: .....

**731 Old Sackville Road, Lower Sackville, NS, Canada B4C 3H6  
Tel: (800) 281-6661 Fax: (877) 278-1991 www.winemaker.com**