



**CREDIT APPLICATION**

**OPERATING NAME:** \_\_\_\_\_

**DELIVERY ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_

**STATE:** \_\_\_\_\_

**ZIP CODE:** \_\_\_\_\_

**TELEPHONE #:** \_\_\_\_\_

**FAX#:** \_\_\_\_\_

**BILLING INFORMATION**

**BILLING ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_

**STATE:** \_\_\_\_\_

**ZIP CODE:** \_\_\_\_\_

**TELEPHONE #:** \_\_\_\_\_

**FAX#:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**AP CONTACT:** \_\_\_\_\_

*PLEASE CHOSE ONE:* WEEKLY STATEMENT VIA EMAIL

MONTHLY STATEMENT VIA EMAIL

**LEGAL CORPORATE NAME:** \_\_\_\_\_

**OWNERS AND/OR OFFICERS**

**NAME:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**SSN:** \_\_\_\_\_

**NAME:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**SSN:** \_\_\_\_\_

**DO YOU OWN OR LEASE THE PROPERTY?** \_\_\_\_\_

**(IF LEASED) NAME OF LANDLORD:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**BANK INFORMATION**

**BANK NAME:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**ACCOUNT #:** \_\_\_\_\_ **POINT OF CONTACT:** \_\_\_\_\_

**TRADE REFERENCES** (OTHER THAN LIQUOR DEALERS) - please provide 3 - \*REQUIRED\*

1. **COMPANY:** \_\_\_\_\_ **ACCT#:** \_\_\_\_\_

**PHONE#:** \_\_\_\_\_ **POINT OF CONTACT:** \_\_\_\_\_

2. **COMPANY:** \_\_\_\_\_ **ACCT#:** \_\_\_\_\_

**PHONE#:** \_\_\_\_\_ **POINT OF CONTACT:** \_\_\_\_\_

3. **COMPANY:** \_\_\_\_\_ **ACCT#:** \_\_\_\_\_

**PHONE#:** \_\_\_\_\_ **POINT OF CONTACT:** \_\_\_\_\_

**WE AGREE TO PAY ANY & ALL FEES INCLUDING ATTORNEY FEE'S AND/ OR COURT COSTS WHICH MAY BE INCURRED IN THE COLLECTION OF ANY OUTSTANDING DEBTS. ALL ACCOUNTS ARE SUBJECT TO 1.5% PER MONTH CHARGE ON BALANCES PAST 30 DAYS (AN ANNUAL% RATE OF 18%).**

**SIGNED:** \_\_\_\_\_ **DATE:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**TYPE OR PRINT NAME:** \_\_\_\_\_

Please note our preferred method of payment is ACH or bill.com. Your sales representative will connect you with our accounting department to facilitate.

CELEBRATING  
**100 YEARS**  
BOSTON MA • SINCE 1914



**Katsiroubas Bros.**  
*Quality wholesale fruit, produce & specialty*

In consideration of and to induce Katsiroubas Brothers to sell goods and extend credit to the above named applicant, the undersigned personally guarantees the payment of any and all indebtedness, which may at any time and from time to time be incurred by the said applicant, including all amounts owed for goods sold, service & finance charges, and all collection costs including attorney's fees. In the event of any default at any time by the above applicant Katsiroubas Brothers shall be entitled to look to the undersigned for such payment, without prior demand or notice. This guaranty shall continue in full force until such time as the undersigned shall give Katsiroubas Brothers written notice of revocation by certified mail. Such Notice of revocation shall be ineffective as to any existing indebtedness or as to any transaction or commitment previously undertaken by Katsiroubas Brothers in reliance upon such gratuity.

**Date (signed & sealed):** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Typed or Printed Name:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_