



# CREDIT APPLICATION

Please print and email to Credit@DFSupply.com

## CUSTOMER INFORMATION

Legal Name for Business:		Business Start Date:	
Mailing Address:			
City:	State:	Zip:	Country:
Shipping Address: <small>If different from billing address</small>			
City:	State:	Zip:	Country:
Phone Number:		Fax:	Email:
Is your business: <input type="checkbox"/> Individually Owned <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Non-Profit <input type="checkbox"/> Government Entity			
Owners Name and Title:		Tax ID Number:	
Type of Business:			
Resale: <input type="checkbox"/> Yes (Please fax copy of Resale Certificate) <input type="checkbox"/> No		Tax Exempt: <input type="checkbox"/> Yes (Please fax copy of Tax Exempt Certificate) <input type="checkbox"/> No	
Accounts Payable Contact:		Phone:	Fax:
Email:			
Purchasing Contact:		Phone:	Fax:
Email:			
PO # Required: <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please provide an example:	
Approximate Credit Line Desired: <input type="checkbox"/> \$500-\$1000 <input type="checkbox"/> \$1000-\$5000 <input type="checkbox"/> \$5000-\$10000 <input type="checkbox"/> Over \$10000*			
<small>* if over \$10000, please provide a current financial statement.</small>			
Terms Requested: <input type="checkbox"/> Credit Card <input type="checkbox"/> COD <input type="checkbox"/> Net 10 <input type="checkbox"/> Net 15 <input type="checkbox"/> Net 30			
How did you hear about us?			

## BUSINESS INFORMATION (Only if different from above)

New Business Name: <small>If different from company name</small>			
New Business Address:			
City:	State:	Zip:	Country:
New Business Phone:		Fax:	Email:
Current Business in Operation OVER 1 Year:			
Billing Address:			
City:	State:	Zip:	Country:
Physical Address: <small>If different from billing address</small>			
City:	State:	Zip:	Country:
Phone Number:		Fax:	Email:

**Mailing Address:** PO Box 20670 • Boulder, CO • 80308-3670

## PERSONAL GUARANTY

The undersigned for and in consideration of the extension of credit by Tundra Restaurant Supply to:

Print Name:
Signature:

Jointly and severally hereby personally guaranty to Tundra Restaurant Supply the payment of an obligation of the borrower and I/we hereby agree to bind myself/ourselves, and assign to pay Tundra Restaurant Supply on demand any sum that becomes due to Tundra Restaurant Supply by the borrower whenever the borrower shall fail to pay the same. It is understood that this guaranty shall be continuing and irrevocable guaranty and indemnity for such indebtedness by the borrower. I/We do hereby authorize the prothonotary or any attorney of any court to appear therein, to confess judgment therein against me/us and in favor of the holder of this guaranty for the amount named herein, with interest and costs of suit and with ten (10) percent added for attorney fees.

## NON-FOOD TRADE REFERENCES WITH WHOM YOU HAVE ESTABLISHED CREDIT

\*\*\*In order to process your application in a timely manner, please use **non-food** vendor references. **WE REQUIRE FAX NUMBERS** for all references\*\*\*

1. Company:	Phone:	FAX:		
Mailing Address:	City:	State:	Zip:	Country:
Customer Account Number w/ Trade Reference:				

2. Company:	Phone:	FAX:		
Mailing Address:	City:	State:	Zip:	Country:
Customer Account Number w/ Trade Reference:				

3. Company:	Phone:	FAX:		
Mailing Address:	City:	State:	Zip:	Country:
Customer Account Number w/ Trade Reference:				

## BANK INFORMATION

Name of Bank:				
Mailing Address:	City:	State:	Zip:	Country:
Account Number:		Line of Credit Number:		

As a duly authorized owner/officer of the previously stated corporation, I/we, the undersigned, warrant that the information herein given is correct and request that standard credit terms be extended by Tundra Restaurant Supply to our company based on this information. I/we authorize Tundra Restaurant Supply to verify our credit background and further authorize our references to release information directly to Tundra Restaurant Supply for such verification.

Terms of sale to be set after credit review. Purchases, which are delinquent, will result in the account being placed on CIA status. A returned check fee of \$25.00 and the account being placed on CIA: certified funds or cash only until the returned check(s) is/are cleared. Your credit line may be revoked or otherwise changed if returned checks are experienced.

If the account is not paid in full as agreed, applicant agrees to pay all costs and expenses of collection, including costs and expenses on appeal, if any. These expenses shall include a reasonable attorney fee.

**(Owner or Corporate Officer must sign)**

Signature:	
Title:	Date:

Thank you for taking the time to apply for terms. For additional questions, please feel free to contact Tundra's Credit Department at 800.447.4941