



CREDIT APPLICATION

Salesman: _____		Date: _____	
Corporate Name: _____		D/B/A: _____	
Ship To: _____		Bill To: _____	
Address: _____		Address: _____	
City: _____	State: _____	Zip: _____	City _____ State _____ Zip: _____
Purchasing Contact: _____		A/P Contact: _____	
Phone # : _____		Phone # : _____	
Corporation _____		Partnership _____	Proprietorship _____
Officer's/Partner's Names & Residence Address	Social Security #	Cell #	Email Address
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Banking Reference

Bank Name _____	Account Number _____
Address _____	City, State, Zip _____
Telephone # _____	Bank Officer to Contact _____

Trade References

	City	State	Phone
Ref 1: _____	_____	_____	_____
Ref 2: _____	_____	_____	_____
Ref 3: _____	_____	_____	_____

We hereby make application for credit to Shirazi Distributing, Inc. If credit is granted, we agree to pay all bills within the stated terms of sale. We agree to pay a service charge for any checks returned from our bank unpaid for any reason. Additionally, we understand that a service charge may be assessed on any unpaid balance in an amount up to the maximum rate allowed by law. Should legal action be taken to secure payment for merchandise received, we will be liable for all expenses, all collection costs, including reasonable attorney's fees, incurred by Shirazi Distributing, Inc. We agree not to transfer or assign this agreement without the prior written consent of Shirazi Distributing, Inc. We agree to give written notice to Shirazi Distributing, Inc. prior to the sale or transfer of all of the stocks or assets of our business; if we fail to do so, then we shall remain fully liable for any unpaid merchandise received by the buyer or transferee of the business. This information is given in confidence for the sole purpose of establishing credit with the Shirazi Distributing, Inc. Authorization is hereby given to make inquiry of all trade and financial sources which are deemed to be necessary by Shirazi Distributing, Inc. to properly evaluate this application.

By _____ Date _____
Corporate Officer / Partner / Owner

Personal Guaranty

I, _____, residing at _____, for and in consideration of your extending credit at my request to _____ (hereinafter referred to as the "Company"), of which I am _____ (Name of Company) _____ (Title), hereby personally guarantee to you the payment at

Shirazi Distributing in the state of Massachusetts of any obligation of the Company and I hereby agree to bind myself to you on demand any sum which may become due to you by the Company whenever the Company shall fail to pay same. It is understood that this guaranty shall be a continuing and irrevocable guaranty and indemnity for such indebtedness of the Company. I do hereby waive notice of default, nonpayment and such notice thereof and consent to any modification or renewal of the credit agreement hereby guaranteed.

Dated this _____ day of _____, 20____

Signature of Guarantor(s): _____

Print Name(s) _____

Signature of Co-Owner, where applicable: _____

Witness: _____ Date: _____