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# *Ninos Fine Foods Inc.*

1475 Carroll Ave. San Francisco, Ca. 94124 Phone: (415) 359-5668 Ninosfinefoods@yahoo.com

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## CREDIT AGREEMENT

### Applicant:

\_\_\_\_\_  
Name of Business

\_\_\_\_\_  
Type of Organization

\_\_\_\_\_  
DBA

\_\_\_\_\_  
Year Established

\_\_\_\_\_  
Billing Address

\_\_\_\_\_  
Delivery Address (if different)

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Business Telephone Number

\_\_\_\_\_  
Business email

\_\_\_\_\_  
Fax Number

\_\_\_\_\_  
Website

### Ownership

\_\_\_\_\_  
Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
e-mail Address

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
e-mail Address

### Financial Information:

\_\_\_\_\_  
Bank Name

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Contact Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Checking Account Number

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Savings Account Number

\_\_\_\_\_  
Credit Card

\_\_\_\_\_  
Loan Account Number

### References:

_____ Name	_____ Name	_____ Name
_____ Address	_____ Address	_____ Address
_____ City	_____ City	_____ City
_____ State	_____ State	_____ State
_____ Zip	_____ Zip	_____ Zip
_____ Telephone Number	_____ Telephone Number	_____ Telephone Numbe

### For office use only:

Denied \_\_\_\_\_ Approved \_\_\_\_\_ Terms \_\_\_\_\_ Effective Date \_\_\_\_\_  
Credit Limit \_\_\_\_\_ Account Code \_\_\_\_\_ Verify By \_\_\_\_\_

*Ninos Fine Foods*

AGREED TO BY

AGREED TO BY

Signature \_\_\_\_\_

Signature \_\_\_\_\_

PRINT NAME \_\_\_\_\_

PRINT NAME \_\_\_\_\_

DATE \_\_\_\_\_

DATE \_\_\_\_\_

I/We agree to be bound by the terms and conditions of sale as agreed Upon with Nino's Fine Foods. I/We personally guarantee payment for all Goods purchased by the above applicant even should the applicant be a corporation, and agree to advise you of any significant change in our financial Position. I/We understand that a service charge of 2% per month (24% per annum) Will be charged On all past due balances. In the event of legal action, to collect payment for goods purchased under this agreement, I/We agree to pay All reasonable attorney's fees, court costs, and other costs of collection.