



## BRAND VENDING PRODUCTS, LLC.

### CREDIT APPLICATION

#### 1. COMPANY INFORMATION

Full Legal Name/Business Entity	Phone Number	Fax Number	
Doing Business As (DBA)			
Physical Address	City	State	Zip
Billing Address (If different from above)	City	State	Zip
Company Structure: <input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Disregarded Entity <input type="checkbox"/> Other: _____			
Principle Name(s) and Address(es)			
NAME/Position _____	Physical Address _____	City _____	State _____ Zip _____
NAME/Position _____	Physical Address _____	City _____	State _____ Zip _____
Sales/Purchasing Rep(s): _____		A/P Contact: _____	
General Manager: _____		Field/Service Rep: _____	

#### 2. BUSINESS CREDIT INFORMATION

Federal Tax ID	Year business established	Years business under current ownership
Gross yearly Revenue	Date of incorporation	State of incorporation
Credit line requested	Terms requested	

#### 3. BANK REFERENCE

Bank Name	Account #	Contact and Phone Number	
Address	City	State	Zip      Fax

#### 4. CREDIT REFERENCES

**DUNS #:**

Company Name	Account #	Contact and Phone Number	
Address	City	State	Zip      Fax
Company Name	Account #	Contact and Phone Number	
Address	City	State	Zip      Fax
Company Name	Account #	Contact and Phone Number	
Address	City	State	Zip      Fax

**5. PROPRIETOR AUTHORIZATION**

By signing this Application, I authorize Brand Vending Products, LLC. to research our credit and financial records including our banking records. As part of such research, I authorize Brand Vending Products, LLC. to request and obtain consumer credit reports on our company and its principals in connection with the opening, monitoring, renewal and extension of this and other accounts with Brand Vending Products, LLC. and the marketing of other products and services to me and my business by Brand Vending Products, LLC. If I request, you will tell me whether our credit report was requested and, if so, the name and address of the credit reporting agency that furnished the report.

First Name	Initial	Last Name	Social Security Number
Present Home Address			Home Phone Number
City		State	Zip
Authorized Signature			

First Name	Initial	Last Name	Social Security Number
Present Home Address			Home Phone Number
City		State	Zip
Authorized Signature			

**6. PROPRIETOR GUARANTY**

By signing this Application, I acknowledge that I have personally guaranteed the debts and obligations of the applying company and agree that I am personally obligated to perform all of the terms of, and make all payments to Brand Vending Products, LLC. as required by, the agreement of which this Application is a part.

First Name	Initial	Last Name	Social Security Number
Present Home Address			Home Phone Number
City		State	Zip
Authorized Signature			

First Name	Initial	Last Name	Social Security Number
Present Home Address			Home Phone Number
City		State	Zip
Authorized Signature			

PLEASE NOTE: All sections are required in order to begin processing your Application for Credit with Brand Vending Products, LLC. Any invalid signature and any information furnished that proves to be invalid will void all terms extended herein and cause the above mentioned company and its principals to be found in default with all monies due, payable immediately upon discovery. By signing the above Sections 5 and 6, you hereby authorize Brand Vending Products, LLC. to perform Credit Analysis on an ongoing basis for the life of your account with Brand Vending Products, LLC. If, at any time, the above information has changed without proper notification (30 days and in writing with new signatures), the account will become due and payable immediately and all subsequent credit will be suspended until such time as a new Credit Application process can occur. Furthermore, a Finance Charge of 2% will be added to all outstanding amounts past 30 days from the date of the invoices and I agree to pay the Finance Charges once they are assessed to my account.