# **GUY'S QUALITY MEATS**

2872 N US HIGHWAY 1 FORT PIERCE, FL 34946

# CONTACT

772-460-2662

772-460-0512 (Fax)

GQM95@aol.com

WWW.GuysQualityMeats.com



Attention Valued Customers:

Crosscheck requires all customers to provide the account signers driver license number. We need the driver's license number for the acceptance of processing the checks.

Thank you for your business and cooperation.



Guy's Quality Meats, Inc. 2872 N. U.S. Highway 1 Fort Pierce, FL 34946

### **CUSTOMER APPLICATION FORM**

| Business Tel.#                             | EMAIL            |   |
|--|------------------|---|
| EXACT LEGAL NAME OF COMPANY<br>(APPLICANT) | TRADE NAME/DBA   | CORPORATION<br>PROPRIETORSHIP<br>PARTNERSHIP      |
| BILLING/MAILING ADDRESS                    | FEDERAL TAX ID#  | COPY OF SALES TAX<br>CERTIFICATE                  |
| CITY, STATE, ZIP                           | TYPE OF BUSINESS | DATE BUSINESS ESTABLISHED<br>UNDER CURRENT OWNERS |

#### OWNER(S)

| Name/Title   | Home Address | City, State, Zip Code |
|--------------|--------------|-----------------------|
|              |              |                       |
|              |              |                       |
| Cell Phone # | SS#          | Driver's License #    |
|              |              |                       |
|              |              |                       |

#### **BANK REFERENCES**

| BANK NAME       | ADDRESS | CITY, STATE, ZIP |
|-----------------|---------|------------------|
| ACCOUNT OFFICER | FAX #   | ACCOUNT #        |

#### PERSONAL GUARANTEE

The undersigned, in consideration of credit privileges being extended to the above-named applicant, does hereby unconditionally guarantee and promise to pay any and all obligations of said applicant which have in the past or may in the future be owing to Guy's Quality Meats on open account or otherwise, including without limitation, attorney's fees. The undersigned waives any right to require Guy's Quality Meats to proceed against Applicant or pursue any other remedy and any statute of limitations pertaining thereto: and the undersigned further waives all presentments, acceptance of the guarantee and of the incurrence of modification of existing or additional indebtedness. No delay in the enforcement of the personal guarantee shall affect the liability of the undersigned.

Date

Guarantor Sign

Salesperson

**Guarantor Print** 



#### MAJOR TRADE REFERENCES

| NAME OF COMPANY | PHONE NUMBER | FAX NUMBER | CUSTOMER/ACCOUNT<br>NUMBER |
|-----------------|--------------|------------|----------------------------|
| 1.              |              |            |                            |
| 2.              |              |            |                            |
| 3.              |              |            |                            |
| 4.              |              |            |                            |

In order to induce Guy's Quality Meats to extend credit to Applicant and understanding that the Company shall rely upon representation made by or on behalf of Applicant, Applicant agrees to pay for all deliveries according to the terms stated on the applicable invoices and/or sales contract(s). Applicant's signature below certifies that the information and representations provided herein are true and accurate.

In completing this application for credit, Applicant grants the company permission and otherwise expressly authorizes the company to contact consumer credit reporting agencies, commercial credit reporting agencies, and any or all of the trade and bank references listed in conjunction with the application for credit, together with any other references which may be provided by the Applicant of any trade or bank references.

Should credit be granted to Applicant, all decisions with respect to the extension or continuation of credit shall be in Guy's Quality Meats sole discretion. No terms and conditions of a purchase order can become part of our contract. Unless approved in writing by Guy's Quality Meats. Guy's Quality Meats may impose a finance charge the lower of 1.5% per month or the highest rate allowed by law when the account becomes delinquent.

In the event it becomes necessary to place the account with an attorney or agency for collection, Applicant agrees to pay all costs of collection, including reasonable attorney's fees.

In consideration for the extension of credit to the Applicant, Applicant agrees that any dispute arising out of the debtor/creditor relationship or any other contractual relationship between the parties shall be adjudicated in a court of competent jurisdiction within the Commonwealth of Florida.

Date

Company Name

Signature of Owner/Officer



2872 N. US Highway 1 Fort Pierce, FL 34946 Tel.# 772-460-2662 Fax # 772.460-0512 Email: <u>GQM95@AOL.COM</u>

## <u>Customer is responsible for delivery of this authorization to said bank and returning it</u> to Guy's Quality Meats when completed.

| Your name has been furnished as a bank reference. The subject company has authorized Guy's Quality Meats to obtain information from you and this information will be held in confidence. |       |  |  |
|--|-------|--|--|
| Company Name;  |       |  |  |
| Customer Name:   |       |  |  |
| Address:   |       |  |  |
| City, State, Zip:  |       |  |  |
| Bank Name:   |       |  |  |
| Account Number:  |       |  |  |
| Customer Authorized SignatureE   | Date: |  |  |
| (Please note that your bank may incur a FEE for this service on your acc   | ount) |  |  |

# Bank Use Only

| Please | complete the following                           |                               |       |
|--------|--|-------------------------------|-------|
| •      | Date Account Opened                              |                               |       |
| •      | Average daily balanced<br>Current Loans? (Y / N) |                               |       |
|        |  | Is Credit Line / Loan Secured |       |
| ٠      | NSF Checks? (Y /N)                               |                               |       |
| ٠      | Your Appraisal of Account?                       |                               |       |
|        | Satisfactory                                     | Unsatisfactory                |       |
|        | COMMENTS:  |                               |       |
|        | Name:  | Title:                        | Date: |

All information will be kept in strict confidence. Thank you for your assistance.