

APPLICATION FOR CREDIT

Credit for initial opening accounts is limited to the highest of the references submitted.

Amount of credit requested \$ _____

SEAPORT MEAT COMPANY

2533 Folex Way, Spring Valley, CA 91978

TELE. (619) 713-2278 FAX (619) 713-2285

REMIT TO:

P.O. Box 1159, Spring Valley, CA 91979-1159

To our Customers and Prospective Customers:

Seaport Meat Company prides itself in the service it provides to our customers. You can help us to serve you quickly by filling out this application as completely as possible. A signature is required and should be signed by owner, partner, officer or manager, stating title.

Name of Business (Legal Name) _____

Business Address _____

How long at this address?

Business Tele# _____ Fax # _____

Contact in Billing Dept: _____ Special billing requirements: _____

Employer Id. # _____ Resale # _____ Issued by (State) _____

Kind of Business (Activities engaged in) _____

Length of time in Present Business _____ Type of Business (Identify One Below):

Sole Owner Partnership Corporation Limited Liability Other

Company Specify _____

Date Company formed _____ State _____

List of Owners/Representatives (include name, title, home address and social security # _____

Bank Reference _____

Address or Branch _____ Contact: _____

Bank Tele. # _____

Type of Account(s) _____ Acct. #'s _____

Three Local Trade References – Name, Address, Phone #, Fax # & Type of Business

Name _____ Name _____ Name _____

Address _____ Address _____ Address _____

Phone _____ Phone _____ Phone _____

Fax _____ Fax _____ Fax _____

Type _____ Type _____ Type _____

Has the business recently filed a financial statement with a bank? Yes No

If yes, Name and Branch of Bank _____

Have you or the business ever had a business failure or filed any type of bankruptcy proceeding? Yes No

If yes, explain on a separate page.

Name of Seaport Meat Company Sales Representative _____

The above information is submitted for the purpose of obtaining credit. Buyer authorizes Seaport Meat Company to make such inquiries as are necessary to obtain information and authorizes Buyer's bank and/or suppliers to release information regarding Buyer's account(s).

Buyer's signature attests financial responsibility and willingness to pay our invoices in accordance with Seaport Meat Company's terms.

TERMS: Buyer agrees to pay all invoices within _____ and to pay a service charge of **1 1/2 % per month** which is an **annual percentage rate of 18%** on all overdue balances. Buyer further agrees that the site of venue for litigation between the parties is San Diego County and the prevailing party in an action is entitled to reasonable attorney fees and costs. Seaport Meat Company's liability for any damages claimed by Buyer is limited to the purchase of the goods or services in question.

Signature

Date

Print name and Title

Signature

Date

Print name and Title

PERSONAL GUARANTY

I, personally guaranty payment of all invoices of Seaport Meat Company invoices billed to Buyer. The terms and conditions of the credit application are incorporated into guaranty.

Guarantor

Date