



Customer Credit Application

Return via email to accounting@walkercoffee.com or fax to 713-780-7051

Customer Profile

Legal Entity Name: _____ Federal Tax ID: _____

Shipping Address

Street Address: _____ Phone: _____

City: _____ State: _____ Zip: _____ Fax: _____

Billing Address (If different from above):

Street Address: _____ Phone: _____

City: _____ State: _____ Zip: _____ Fax: _____

E-Mail: _____

Company is a: (please check one)

Corporation _____ **Partnership** _____ **Proprietorship** _____

Company was established on: _____

Number of Employees: _____

Company Directors/Officers/Principles

Name 1: _____ Title: _____

Phone: _____

Name 2: _____ Title: _____

Phone: _____

Name 3: _____ Title: _____

Phone: _____



Resale Certificate #: _____

Issuing State: _____

Wholesale Certificate #: _____

Issuing State: _____

Trade References

Vendor 1: _____ Contact: _____

Address: _____ Email: _____

Phone #: _____ Fax: _____

Vendor 2: _____ Contact: _____

Address: _____ Email: _____

Phone #: _____ Fax: _____

Vendor 3: _____ Contact: _____

Address: _____ Email: _____

Phone #: _____ Fax: _____

Thank you for requesting to open an account with our company. In order to complete our credit check, please fill in all sections of this form, including the bank request, sign at the bottom of the bank reference and the completed application.



Bank Reference Check

To: _____
(Your banking institution)

We: _____
(Your company name)

Account number (_____) is requesting that you email or fax the following information to
Walker Coffee Trading, L.P. - Email: accounting@walkercoffee.com Fax: (713)780-7051.

.....
Date account opened: _____

Monthly Average Collected Balance: _____

Balance as of (date): _____

Account status: _____

Name of person furnishing information: _____

Title: _____

Date: _____

Phone number: _____

We: _____
(Your company name)

Customer Authorization Signature

Printed Name and Date



Conditions

Terms of sale, including terms of payment and charges, for each purchase are agreed to be those specified on the face of each invoice. The customer hereby agrees to pay all costs of collection or legal fee should such action be necessary due to non-payment. The above information is willingly supplied and the creditor is authorized to contact the above bank and trade references in order to establish the credit worthiness of the above named company. If the applicant is not a corporation, the creditor is authorized to obtain credit reports on the proprietors, partners, or principals. Should credit availability be granted by the creditor, all decisions with respect to the extension or continuation shall be in the sole discretion of the creditor. The creditor may terminate any credit availability within its sole discretion.

A finance charge of 1½ % per month (18% annual percentage rate) will be added to past due accounts. Purchaser agrees that title to merchandise shall remain in seller's name until invoice is fully paid. A \$25.00 charge will be assessed for returned checks.

I HAVE READ AND UNDERSTAND THE ABOVE TERMS AND CONDITIONS, AND HEREBY AGREE TO THEM:

Applicant's Name: _____ Title: _____

Signature: _____ Date: _____

I AUTHORIZE THE SELLER AND THEIR ASSIGNS TO OBTAIN A CONSUMER CREDIT REPORT ON MY CREDIT HISTORY.

Applicant's Signature: _____ Date: _____