

256 Minnesota Ave.
Troy, MI 48083
Web Site:
midwestacornnut.com



Phone: 248-583-0550
1-800-422-6887
FAX: 248-583-9130
Toll Free FAX: 877-583-2300

CREDIT APPLICATION

COMPANY NAME: _____

ADDRESS: _____

STATE: _____

PHONE: _____ FAX: _____

DO YOU USE A DBA? _____

IS YOUR BUSINESS: IND. PROPRIETORSHIP PARTNERSHIP CORPORATION

IF CORPORATION, YEAR INCORPORATED: _____

STATE OF INCORPORATION: _____

TAX I.D. NO. _____

SHIP TO ADDRESS (IF DIFFERENT FROM MAILING):

LIST OWNERS/OFFICERS:

PERSON TO CONTACT FOR PAYMENT: _____

WHO IS AUTHORIZED TO PLACE ORDERS:

ARE PHONE ORDERS AUTHORIZED: _____

REFERENCES:

BANK _____ ACCT #: _____

PHONE: _____ CONTACT: _____
FAX: _____

PLEASE LIST FIVE (5) TRADE REFERENCES (WE ARE UNABLE TO HONOR CREDIT APPLICATIONS WITH LESS THAN FIVE (5) TRADE REFERENCES):

1. _____ PHONE: _____
_____ FAX: _____
2. _____ PHONE: _____
_____ FAX: _____
3. _____ PHONE: _____
_____ FAX: _____
4. _____ PHONE: _____
_____ FAX: _____
5. _____ PHONE: _____
_____ FAX: _____

PLEASE NOTE:

OUR TERMS ARE NET 30 DAYS. YOUR SIGNATURE ON THIS APPLICATION
ACKNOWLEDGES YOUR AGREEMENT TO STAY WITHIN OUR TERMS.
CUSTOMER WILL BE RESPONSIBLE FOR ANY LEGAL FEES INCURRED
IN THE EVENT OF A DEFAULT ON THE ACCOUNT

SIGNATURE: _____

TITLE: _____

(Must Be Signed By An Officer)

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DATE: _____

BANK/CONTACT: _____

OUR ACCOUNT NUMBER: _____

TO WHOM IT MAY CONCERN:

Please accept this as official authorization to release information to Midwest Acorn Nut Company/ Hexagon Enterprises for the purpose of assisting them in establishing an open line of credit for us.

Thank you very much for your cooperation in this matter.

Sincerely,

Name: _____

Title: _____