



4500 7th Ave. S. • P.O. BOX 80923 • Seattle, WA 98108
 Main (206) 622-2622 1-800-552-7374 FAX: (206) 622-2625
 Accounting Fax: (206) 676-6356

Application for Commercial Credit

Business Name: _____

Business Street Address: _____

Business Mailing Address: _____

Telephone # _____

Fax # _____

Email Address: _____

Date Established: _____

Type of Business: (check one)

Accounts Payable Contact _____

A/P Phone _____ **Email** _____

Corporation (List officers, State of Incorporation, Name and Address of registered agent)

Partnership (List Name and Home Address of Partners)

Proprietorship (List name and Home Address of Owner)

Annual Sales: \$ _____

Federal Tax ID# _____

Non-Profit Organization

Line of Business: _____

Credit Limit Requested: \$ _____

Financial Information

Bank _____ Branch _____ Years With Bank _____

Account No. _____ Account Officer _____ Phone No. _____

Trade References: (List Three) 1) _____ **Telephone #** _____
 2) _____ **Telephone #** _____
 3) _____ **Telephone #** _____

TERMS AND CONDITIONS OF CREDIT RELATIONSHIP

By the signature below, Applicant represents that it is seeking credit for business purposes and has the financial ability to pay all debts incurred in the event the credit requested is granted. Applicant authorizes Plymouth Poultry Company to investigate the references listed in this application and further authorizes Applicant's bank and any credit reporting agencies to release information regarding the Applicant's credit history. Applicant agrees to update the Application and financial statements upon request.

In the event credit is granted, Applicant agrees to pay all amounts owed to Plymouth Poultry Company within (7) days of invoice, unless a different due date is specifically stated on invoices issued. Any amounts not paid by due date shall be subject to a late payment charge of 1.5% per month, or the highest rate allowed by law, if lower. Applicant further agrees to pay all costs of collection, including attorney's fees, incurred by Plymouth Poultry Company in connection with any delinquent account. A \$35.00 service charge will be assessed for any check returned by a bank. Applicant hereby submits to the jurisdiction of the State of Washington and agrees that the venue for any action brought pursuant to this agreement shall be in King County, Washington.

As a condition of this application for commercial credit, Applicant agrees to execute the personal guarantee on the reverse side of this application. Applicant understands that failure to complete both sides may result in rejection of the Application. Applicant has read and understands these Terms and Conditions of credit relationship, affirms that the information contained in this application and any financial statements is true and correct to the best of the applicant's knowledge. The signor below certifies that he/she is authorized to enter into binding agreements on behalf of Applicant.

Applicant should retain a copy of this application as it contains the terms and conditions that will govern the rights of the parties should credit be extended. Should this application be denied, the applicant has the right to be informed of the reason for such a denial; however, such request must be made, in writing, within 60 days of notification of denial.

We may request a financial statement in the future.

Print Name: _____

Driver's License# _____ copy attached

Signature: _____

Date: _____

Application prepared by: _____

Title: _____



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Application for Commercial Credit

Personal Guaranty

Date: _____

I, _____, for and in consideration of your extending credit
 to _____ (hereinafter referred to as the "Company"), of which
 (Name of Company)
 I am _____, hereby personally guarantee to Plymouth Poultry Company the
 (Owner/President)
 payment of any and all obligations of the Company and I hereby agree to bind myself to pay you on demand any sum that
 may become due to you by the Company whenever the Company shall fail to pay the same. It is understood that this
 guarantee shall be a continuing and irrevocable guarantee and indemnity for all indebtedness of the Company. I do hereby
 waive notice of demand for payment, notice of default, and notice of nonpayment and hereby consent to any modification
 or renewal of the credit agreement hereby guaranteed. I further agree to pay all costs of collection in the event this
 guarantee is enforced, and stipulate that jurisdiction and venue for any action to enforce this guarantee is proper in King
 County, Washington.

Full Legal Name(Printed) _____ Name of Spouse _____

Signature: _____

Home Address of

Guarantor: _____

City: _____ State: _____ Zip: _____

Telephone No.: _____ Social Security No.: _____

Witness: _____