

### **Credit Application & Agreement**

INSTRUCTIONS: This Credit Application and Agreement allows Samuels and Son Seafood Co. Inc. and its affiliates and related entities (Samuels) to extend you credit. All applicable spaces must be completed. A Personal Guarantee may be required. \*Please note a \$75.00 fee will be applied for new Credit Applications.

For Office Use			
SALESMAN	Amount of Credit Requested:	Terms/Time:	
<u>JALLSIVIAN</u>		Ternsy time.	
		Dollar Amount:	
DATE			
DAIL			
BUSINESS INFORMATION - CORPORATION			
Corporate Name:			
DBA/Name of Business:			
Business Address:			
Length of Time at Business Address:			
Business Phone Number:			
Corporate Officers: President:			
Vice President:			
Secretary/ Treasurer	·		
Federal Employee Identification #:			
Date of Incorporation:	Sta	ate of Incorporation:	
State & Country of Fictitious Name Registra	ation:		
Billing Address if Different:			
A/P Phone Number if Different:		P Email:	
Would you like to receive Monthly Statements: If yes, how would you prefer to receive them? Choose an			
Liquor License #:			
BUSINESS INFORMATION – INDIVIDUAL PA	RTNFRSHIP		
Trade Name:			
Business Address:Page 1			0.2020



# **Credit Application & Agreement Continued**

Telephone N	umber:			
Length of Time in Business:				
State & Coun	try of Fictitious Name Registration:			
Billing Addre	ss if Different:		<del></del>	
A/P Phone N	umber if Different:			
Length of Tin	ne at Present Business Address:			
CREDIT INFOR	MATION – TRADE REFERENCES			
Bank:		Branch Address:		
Branch Phone	Number:	Account #:	Length of time doing Business w/this Bank	
TRADE REFERE	NCES:			
	<u>Name</u>	<u>Address</u>	Phone Number	
Meat:				
Poultry:				
,				
Produce:				
CREDIT INFORM	VIATION – Principals of Financial Responsibility (	Officers, Partners, or Owners)		
1. Name:	Owner:		SS#:	
		<del>-</del>		
	Spouse:	DOB:	SS#:	
	Own:   Street Address:	Years at	this Address:	
	Rent:   Street Address:	Phone N	lumber:	
	City, State, Zip:			
	Percentage of Ownership:			

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# **Credit Application & Agreement Continued**

2. Name:	Owner:		DOB:		SS#:
	Spouse: _		DOB:		SS#:
	Own: □	Street Address:		Years at this Add	ress:
	Rent: □	Street Address:		Phone Number: _	
		City, State, Zip:			
	Percentag	e of Ownership:			
		·	subject to the following terms and cond		
<ol> <li>The undersigne Samuels is not</li> <li>The undersigne whether or not:</li> <li>The undersigne to comply with joint and severa</li> <li>The parties he</li> <li>I/We hereby a</li> <li>The Undersigne</li> </ol>	ed purchaser agrepaid within said agree to allow the decided agree to allow the decided agrees to notify said notification. If and the relative reby acknowles authorize Samuned Purchaser sagreement.	rees that all amounts due Samuels are diperiod, a delinquency charge of 18 ow Samuels to obtain a consumer of the stopay, in the event becomes delinquindemnifying company for all expersonable words here in shall be read as if wridge that the goods and/or services less to contact the references listed hereby agrees and consents to the The undersigned herby waives a tri	payable within agreed upon terms; but not to exc 8% on an annual basis shall be added to sum d credit report for the sole purpose of credit sco uent and is turned over to a collection agency/attorn nses incurred with the collection of the amou ding change of ownership of the Customer and furth ted by more than one person, then, in such event the titen in the plural.  purchased from Samuels are not payable in instence in the county of Philace is exclusive jurisdiction of the county of Philace is by jury for any and all disputes.	eed 30 days unless author lue. ring. ney for collections, fees ec ints payable to lender. her agrees to be liable for a le liabilities and obligation stallments, but are paya ponsibility.	orized in writing. If any amount due qual to 33 1/3% of the balance all purchases should the undersigned fail no of the undersigned hereunder shall be able in full as stated herein.
Authorized S	Signature/Da	ite:	Title:		
Print Name:					
	orize you to	release to Samuels & Son inf	formation regarding my bank account	t #	
TO:					
BANK NAME					

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#### **BANK AUTHORIZATION**

I hereby authorize Samuels & Son Seafood Company, Inc. and affiliates, related entities and their agents to verify information with my bank and I further authorize my bank of release such information to them.

Bank:	Branch:
Account:	
Bank:	Branch:
	Authorized Signature (Title)
	Company

10.2020





#### PERSONAL GUARANTEE

FOR VALUE RECEIVED, and in order to induce Samuels & Son Seafood Co. Inc, and affiliates and related entities (Samuels) to forbear from the termination of credit and further induce Samuels to extend credit and sell upon terms of credit to (enter name below)

a corporation hereinafter called "principal", food stuffs and provisions or in the future to be sold by Samuels to the principal on credit, the undersigned does agree to guarantee and by guarantor (if multiple guarantors, jointly, severally and in the alternative) and does hereby absolutely guarantee to you payment of any and all indebtedness incurred by the said principal as the result of credit transactions withyou.

This is a continuing guarantee and until revoked in writing addressed to Samuels, at 3400 S. Lawrence Street, Philadelphia, PA 19148 by certified mail/return receipt requested, shall cover all future indebtedness of the aforesaid principal corporation, including indebtedness arising under successive transactions that shall either continue the indebtedness or from time to time renew it after it has been satisfied and shall include all service charges, interest, reasonable attorneys' fees and collateral charges in addition to principal charges.

The undersigned acknowledges that Samuels is at liberty to give the purchaser, at any time and from time to time such extensions of credit as Samuels may think proper and upon terms as Samuels may agree together with changes of terms from time to time as Samuels may agree until the undersigned notifies you in writing by certified mail/return receipt requested to cease providing changes in terms or extensions of credit under this guarantee. The issuance of such notice either of termination of the guarantee or that the guarantee shall continue in full force and effect subject only that there be no further changes in terms or extensions of credit shall be effective only upon receipt of such notice by Samuels and from and after the date of Samuels' receipt of such notice.

The guarantee shall continue as a guarantee of payment of similar credit extended to the successors or assigns of the Principal and shall inure to benefit of all such successors and assigns, whose credit line is guaranteed hereby, and to the heirs and successors of the undersigned and the heirs and successors of Samuels.

It is agreed that Samuels need not take any action against the principals, any other guarantor or any person, firm, corporation or entity not resorting to any security held by Samuel's at any time before proceeding against any one of the undersigned. The liability of any one of the undersigned shall continue, notwithstanding the bankruptcy, insolvency, incapacity, death, disability of the Principal, any co-guarantor or the revocation hereof by any other guarantor of their guarantee if there be more than on guarantor.

The undersigned expressly waive(s) notice of payment, acceptance of this continuing guarantee, protest and notice of protest with respect to the indebtedness covered hereby as well as notice of any renewals, extensions or changes in terms of the credit relationship with the principal.

If more than one guarantor signs this agreement, the obligation of all guarantors hereunder shall be jointly and severally and all words used herein in the singular shall be deemed to have been used in the plural and those used in the plural shall be deemed used in the singular when the context and construction so require.

Signature:	Signature
	(Seal)
Print Name:	Print Name:
SS#:	SS#
Residence Address:	Residence Address:
Residence Phone Number:	Residence Phone Number:
Spouse Signature:	Spouse Signature:
	(Seal)
Print Name:	Print Name:
SS#:	SS#:
Residence Address:	Residence Address:
Residence Phone #:	Residence Phone #:
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