



BACCHUS
PRESS

CREDIT APPLICATION

CUSTOMER NAME TELEPHONE DATE

CUSTOMER ADDRESS

CITY STATE ZIP CODE

TYPE OF BUSINESS SINGLE PROPRIETORSHIP PARTNERSHIP CORPORATION

NAME OF CUSTOMER CONTACT

TITLE TELEPHONE

TYPE OF BUSINESS

HOW LONG IN BUSINESS? YEARS MONTHS

ARE YOU REGISTERED WITH DUN & BRADSTREET? RATING

MONTHLY CREDIT REQUIRED TAX NUMBER

IF TAX EXEMPT, LIST EXEMPT NUMBER AND ATTACH COPY OF CERTIFICATE

NAMES OF PRESIDENT/PARTNERS/OWNERS

BANK
REFERENCE

BANK BRANCH NUMBER OF YEARS ACCOUNT NUMBER

ADDRESS CITY/STATE/ZIP BANK OFFICER TELEPHONE



**TRADE
REFERENCES**

■ COMPANY TELEPHONE FAX

ADDRESS CITY/STATE/ZIP CONTACT PERSON

■ COMPANY TELEPHONE FAX

ADDRESS CITY/STATE/ZIP CONTACT PERSON

■ COMPANY TELEPHONE FAX

ADDRESS CITY/STATE/ZIP CONTACT PERSON

■ COMPANY TELEPHONE FAX

ADDRESS CITY/STATE/ZIP CONTACT PERSON

I verify that the above information is true and correct and hereby grant permission for any person to furnish to Bacchus Press any and all information which may periodically be requested for purposes of credit verification. I understand that this credit line, once established, is not a fixed amount. It may be raised or lowered at the discretion of Bacchus Press.

All sales are net 30 days from the invoice date. All past due accounts accrue interest at a rate of 1½% per month, an annual rate of 18%, or the maximum rate permitted by law. In the event of suit or any other legal and/or administrative action brought by the parties herein to enforce their legal rights, the prevailing party is entitled to recovery of reasonable attorney's fees and court costs. New client terms are 50% down and 50% upon delivery unless otherwise specified in writing by the accounting department.

I have read and I understand the above terms and conditions. I am authorized as an officer, partner, or the sole proprietor of this company to enter into this credit agreement.

SIGNED DATE

PRINT NAME TITLE



BACCHUS
PRESS

BACCHUS PRESS

1287 Sixty Sixth Street
Emeryville CA 94608

PH: 510.420.5800 FAX: 510.420.0881

BLANKET AUTHORIZATION TO RELEASE CREDIT INFORMATION

DATE: _____

Please accept this as written authorization to release credit information to Bacchus Press for the purpose of obtaining a credit rating for our company account.

NAME (please print)

TITLE

SIGNATURE

COMPANY