

D & N PROVISIONS INC.  
80 NEWMARKET SQ.  
BOSTON, MA 02118

PHONE: 617-233-3325

FAX: 617-269-4398

APPLICATION FOR CREDIT

Full Business Name \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_ Alt # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Fax No. \_\_\_\_\_

Number Of Years In Business \_\_\_\_\_ Building Owned \_\_\_\_\_ Leased \_\_\_\_\_

**Complete The Following For Each Shareholder, Principal, or Partner**

	<u>Name</u>	<u>Home Address</u>	<u>Home Phone # / Alt. Phone</u>	<u>Social Security #</u>
1)	_____	_____	_____	_____
2)	_____	_____	_____	_____
3)	_____	_____	_____	_____

**Please List 3 Of Your Current Suppliers:**

	<u>Name</u>	<u>Address</u>	<u>Telephone Number</u>
1)	_____	_____	_____
2)	_____	_____	_____
3)	_____	_____	_____

**Bank References:**

	<u>Bank Name</u>	<u>Contact</u>	<u>Account Number</u>	<u>Telephone Number</u>
1)	_____	_____	_____	_____
2)	_____	_____	_____	_____

I (We) hereby authorize the financial institution and credit references to release information regarding the credit standing for the above-mentioned accounts. I (We) certify that all of the above information is correct. If credit is granted, I (We) agree to pay late charges of 1.5% per month, 18% Annually, on all overdue balances, as well as all collection cost and/or reasonable attorney fees and court cost. Also, there will be a charge of \$25.00 for any check returned by the bank for any reason. Until credit is granted, all orders are COD. The credit information is provided solely for the use of D & N Provisions, Inc. I (We) have a financial interest in said business and hereby personally guarantee payment of any and all obligations past, present and futures incurred by the above referenced entity and agree to personally pay the same in the event of default of payment.

\_\_\_\_\_  
Signature Title Date

\_\_\_\_\_  
Signature Title Date