

Credit Application CORPORATE NAME DBA/BUSINESS NAME BUSINESS STREET ADDRESS: STATE **ZIPCODE** CITY Length of Time at Business Address **BUSINESS PHONE NUMBER** FEIN# DATE OF INCORPORATION STATE OF INCORPORATION STATE & COUNTRY OF FICTICIOUS NAME REGISTRATION **BILLING STREET ADDRESS** (IF DIFFERENT) STATE **ZIPCODE** CITY AP PHONE # **AP EMAIL** Would you like to receive Monthly Statements? ☐ YES ☐ NO If yes, how would you prefer to receive them? ☐ MAIL ☐ EMAIL CREDIT INFORMATION – TRADE REFERENCES ACCOUNT #: **BANK: BRANCH STREET ADDRESS:** CITY: STATE ZIPCODE TRADE REFERENCES (3): NAME **ADDRESS PHONE NUMBER**



Parties hereby agree that all purchases made are subject to the following terms and conditions:

Payment Location and Terms:

- All amounts due for goods and services purchased from Atlantic Red Crab Co. <u>LLC are payable at 132 Herman Melville Blvd.</u>, New Bedford, MA 02740¹.
- Payments are to be made within the agreed-upon terms, not exceeding **30 days**, unless authorized in writing. Late payments may incur a fee.

Credit Report Authorization:

• The undersigned purchaser agrees to allow Atlantic Red Crab Co. LLC to obtain a **consumer credit report** solely for credit scoring purposes.

Delinquent Accounts and Collection Fees:

- If the account becomes delinquent and is turned over to a collection agency or attorney, the purchaser agrees to pay fees equal to 33 1/3% of the balance.
- These fees cover expenses incurred during the collection process.

Change of Ownership Notification:

- The undersigned must notify Atlantic Red Crab Co. LLC by **certified mail** in case of any pending change of ownership of the customer.
- Failure to comply with this notification may result in the undersigned being liable for all purchases.

Payment in Full:

 Goods and services purchased from Atlantic Red Crab Co. LLC are not payable in installments but must be paid in full as stated in the agreement.

Credit References:

• The undersigned authorizes Atlantic Red Crab Co. LLC to contact the listed references regarding their credit and financial responsibility.

Exclusive Jurisdiction:

•	The Undersigned Purchaser consents to the exclusive jurisdiction of the county of Bristol
	Massachusetts for any claims related to or arising from this agreement.

Authorized Signature/Date	Title	
Print Name		



BANK AUTHORIZATION

I hereby authorize Atlantic Red Crab Co. LLC and affiliates, related entities and their agents to verify information with my bank and I further authorize my bank to release such information to them.

Bank:	
Account Number:	
Bank:	
Branch Address:	
Account Number:	
	Authorized Signature and Title
	Printed Name
	Company
	Date