

BILLING ADDRESS:**SHIPPING ADDRESS:**

LEGAL NAME OF COMPANY (CORPORATE, PARTNERSHIP, OR PROPRIETORSHIP NAME) _____

DBA TRADE NAME _____

ADDRESS _____

ADDRESS SAME AS BILLING ADDRESS

CITY, STATE, ZIP _____

CITY, STATE, ZIP _____

BUSINESS PHONE NUMBER _____

PHONE NUMBER _____

EMAIL ADDRESS _____

PERSON AUTHORIZED TO PLACE OR RECIVE ORDERS _____

ACCOUNT PAYABLE CONTACT AND PHONE NUMBER _____

BUSINESS HOURS _____

A/P EMAIL ADDRESS _____

STATE SALES TAX NUMBER _____ FEDERAL TAX ID NUMBER _____

PURCHASE DATES _____

 CORPORATION LLC PARTNERSHIP INDIVIDUAL CHANGE OWNER? _____ NEW BUSINESS? _____**PROVIDE THE FOLLOWING INFORMATION FOR CORPORATION, OWNERSHIP, PARTNERSHIP OR INDIVIDUAL OFFICER:**

NAME AND TITLE _____

NAME AND TITLE _____

HOME ADDRESS _____

HOME ADDRESS _____

CITY, STATE, ZIP _____

CITY, STATE, ZIP _____

PHONE NUMBER _____

PHONE NUMBER _____

SOCIAL SECURITY NUMBER _____

SOCIAL SECURITY NUMBER _____

DRIVER LICENSE NUMBER _____ STATE _____

DRIVER LICENSE NUMBER _____ STATE _____

TYPE OF BUSINESS: FAMILY RESTAURANT FAST FOOD OTHER _____**FILL US IN ON WHO YOUR BANKER IS:**

BANK NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

CHECKING ACCOUNT NUMBER _____

CONTACT OFFICER _____

PHONE NUMBER _____

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Concept Foods Service
2102A Tobacco Road
Durham, NC 27704
Tel: 919-596-9683
Fax: 919-598-5382

CUSTOMER ACCOUNT APPLICATION

7/19

BUSINESS REFERENCES:

_____ BUSINESS NAME	_____ BUSINESS NAME	_____ BUSINESS NAME
_____ ADDRESS:	_____ ADDRESS:	_____ ADDRESS:
_____ CITY, STATE, ZIP	_____ CITY, STATE, ZIP	_____ CITY, STATE, ZIP
_____ PHONE NUMBER	_____ PHONE NUMBER	_____ PHONE NUMBER
_____ ACCOUNT NUMBER	_____ ACCOUNT NUMBER	_____ ACCOUNT NUMBER

TERMS AND CONDITIONS

Applicant warrants the information and statement in this application is true and correct, and are made for the purpose of inducing CFSD Inc. to establish an open line of credit for buyer. Buyer hereby authorizes CFSD Inc. to obtain any information CFSD Inc. considers necessary from any source concerning statements in this application and the creditworthiness of buyer, and hereby authorizes the release of such information to CFSD Inc. by any such source. In consideration of, and in order to induce CFSD Inc. to establish an open account line of credit based on the foregoing application, the undersigned promises to pay each purchase within the terms of sale shown on CFSD Inc. invoices. If at any time, for any reason, the undersigned is unable to pay for said purchases when due, the undersigned agrees to pay interest calculated as 18% per annum on any past due amount owing. In the event it becomes necessary for CFSD Inc. to incur collection costs or institute suit to collect any amount due under this agreement or any portion thereof, the undersigned promises to pay such additional collection costs, charges, expenses, and reasonable attorney's fees. CFSD Inc. and buyer consent to the State Court of Durham Co., North Carolina as the venue for any legal proceeding arising from this open account. This contract shall be constructed and interpreted under the laws of the State of North Carolina.

FAILURE TO PAY

1. Late Charge. The entire outstanding balance due to CFSD Inc. by Purchaser on all invoices shall become due in full immediately upon the failure by Purchaser to pay any invoice when due. CFSD Inc. may at any time deduct any Purchaser monetary obligations from any amounts owed to Purchaser by CFSD Inc., and to pay only the net sum due, if any. Purchaser agrees to pay a late charge in the amount of 1.5% per month (18% per annum) or the highest rate permitted by law, if not otherwise prohibited by state law, on any past due amounts until collected, and Purchaser agrees to pay all costs of collection incurred by CFSD Inc. including attorney's fees and expenses, should a default in payment or any other obligation of Purchaser to CFSD Inc. occur.
2. The undersigned purchaser hereby agrees that all amounts due for goods and services purchased from CFSD Inc. are payable in US funds to the address shown on the invoice and statement.
3. The undersigned purchaser agrees to pay CFSD Inc. a service charge of \$35.00 for all checks returned by their bank, as well as other charges allowed by law.
4. The parties hereby acknowledge that the goods and/or services purchased from CFSD Inc. are not payable in installments, but are payable in full as stated herein.

APPLICATION MUST BE COMPLETED IN ENTIRETY AND SIGNED BY OWNER OR OFFICER OF CORPORATION.

_____ LEGAL NAME OF COMPANY (CORPORATE, PARTNERSHIP, OR PROPRIETORSHIP NAME)	_____ DBA TRADE NAME
_____ OFFICER OR OWNER PRINT NAME	_____ OFFICER OR OWNER PRINT NAME
_____ SIGNATURE	_____ SIGNATURE
_____ DATE	_____ DATE
_____ SALES REPRESENTATIVE SIGNATURE	_____ DATE

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Durham, NC 27704
Tel: 919-596-9683
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PERSONAL GUARANTY TO CFSD INC.

For and inconsideration of your extending credit at any request to:

LEGAL NAME OF COMPANY (CORPORATE, PARTNERSHIP, OR PROPRIETORSHIP NAME) _____ DBA TRADE NAME _____

Of which I am _____ hereby personally and unconditionally guarantee to CFSD Inc. payment of any obligation of the company, and I hereby agree to bind myself to pay on demand any sum, which may become due to CFSD Inc., by the Company. The undersigned guarantor(s) hereby waive notice of from CFSD Inc. of acceptance and reliance on this personal guaranty, notices of sales made to Company, and notice of default by Company.

Any obligations or the undersigned Guarantor(s) hereunder will be joint and several. Further, the obligations of the undersigned Guarantor(s) will not be affected, excused, modified, or impaired upon the happening, from time to time, of any event. The undersigned Guarantor(s) hereby waive(s) notice of and consent to any extension of time for payment, renewals, release, or other indulgences from time to time, granted by CFSD Inc. to Company in respect of any and all future obligations. This Guaranty shall bind the undersigned Guarantor(s) and Estate(s) of each Guarantor. In the event of failure of Company to pay obligations due and payable to CFSD Inc. may proceed directly to enforce its rights by proceeding first against the undersigned Guarantor(s), without proceeding with or exhausting any other remedies it may have against Company or any other Guarantor(s). The undersigned Guarantor(s) hereby agrees to pay all costs, expenses, fees, including reasonable attorney's fees is CFSD Inc. retains an attorney-at-law to pursue CFSD Inc.'s rights under this Guaranty. This Personal Guaranty shall be binding upon the Guarantor(s), on the Guarantor(s), heirs, successors, assigns, and representatives and survivors, and shall inure to the benefit of CFSD Inc., it successors and assigns. This Guaranty shall be governed by and interpreted under the laws of the State of North Carolina. The undersigned Guarantor(s) further hereby agree, and consent to venue in the State Court of Durham County, North Carolina.

OFFICER OR OWNER PRINT NAME _____

OFFICER OR OWNER PRINT NAME _____

SIGNATURE _____ DATE _____

SIGNATURE _____ DATE _____

HOME ADDRESS _____

HOME ADDRESS _____

CITY, STATE, ZIP _____

CITY, STATE, ZIP _____

WITNESS SIGNATURE _____

DATE _____