

Fine Beverages Since 1973.

COUCH DISTRIBUTING COMPANY

INC.

104 Lee Road - P.O.Box 50004
Watsonville, CA. 95077-5004
Phone 831-724-0649
Fax 831-724-4293

APPLICATION FOR CREDIT

DATE:

CUSTOMER NAME:

DOING BUSINESS AS:

STREET ADDRESS:

RES. PHONE:

BUS. PHONE:

CITY:

STATE:

ZIP:

PLEASE CHECK ONE	INDIVIDUAL	PARTNERSHIP	CORPORATION	FED. TAX NO. (FOR CORPORATION)
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FULL NAME OF OWNER OR OWNERS (OR AUTHORIZED OFFICER(S) OF CORPORATION). LIST HOME ADDRESS & ZIP FOR PARTNERSHIP OR INDIVIDUAL.

ADDITIONAL INFORMATION REQUIRED FOR CONDITIONAL SALES CONTRACTS UNDER THE UNIFORM COMMERCIAL CODE

DEBTOR (INDIVIDUAL SIGNING CONTRACT:

TITLE:

DEBTOR'S SOCIAL SECURITY NO. (FOR PARTNERSHIP OR INDIVIDUAL):

DRIVER'S LICENSE NO. AND STATE OF ISSUE:

ABC LICENSE NO:

RESALE NO:

TYPE OF BUSINESS:

DATE STARTED:

ESTIMATED ANNUAL SALES:

FORMER BUSINESS?

LOCATION:

OWN OR RENT BUILDING - IF RENT - FROM WHOM?

ADDRESS OF OWNER:

TRADE REFERENCES

NAME	ADDRESS	ZIP	PHONE NO.

NAME OF BANK:

CHECKING ACCOUNT#:

STREET ADDRESS:

SAVINGS ACCT#:

CITY:

STATE:

APPLICANT'S SIGNATURE ATTESTS FINANCIAL RESPONSIBILITY, ABILITY AND WILLINGNESS TP PAY OUR INVOICES IN ACCORDANCE WITH THE FOLLOWING TERMS:

THE ABOVE INFORMATION AS WELL AS THAT GIVEN ON THE REVERSE SIDE IS FOR THE PURPOSE OF OBTAINING CREDIT AND IS WARRANTED TO BE TRUE. I/WE HEREBY AUTHORIZE THE FIRM TO WHOM THIS APPLICATION IS MADE TO INVESTIGATE THE REFERENCES LISTED PERTAINING TO MY/OUR CREDIT AND FINANCIAL RESPONSIBILITY.

FIRM NAME:

BY:

TITLE

BY:

TITLE

NOTICE: IN ACCORDANCE WITH CALIFORNIA STATE LAW CREDIT REGULATION #25509, IF YOU HAVE ANY OUTSTANDING INVOICES OVER 30 DAYS OLD, THEY MUST BE PAID OR CURRENT DELIVERY WILL BE C.O.D. INTEREST WILL BE ADDED AFTER 42 DAYS AND EACH SUCCESSIVE 30 DAYS. ALL TEMPORARY LICENSES MUST PAY C.O.D.

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PERSONAL GUARANTEE

DATE: _____

I/We, _____ residing at
_____, for and in consideration of
your extending at my request credit to: _____

Name of Company

(Hereinafter referred to as the "Company"), of which I/We _____ hereby personally guarantee to you the payment at Couch Distributing Company, Inc. in the State of California of any obligation to the Company and I/We hereby agree to bind myself/ourselves to pay you on demand any sum which may become due to you by the Company whenever the Company shall fail to pay the same. It is understood that this guarantee shall be a continuing and irrevocable guarantee and indemnity for such indebtedness of the Company. I/We do hereby waive notice of default, non-payment and notice thereof, and consent to any modification or renewal of the credit agreement hereby guaranteed.

The undersigned agrees to pay all lawful charges, including attorney's fees, court cost, filing fees, and other collection costs incurred by Couch Distributing Company, Inc. in connection with the collection of this account, together with interest thereon at the maximum legal rate.

Printed name

Signature

Printed name

Signature

Witness signature

Witness address

City, Zip

OFFICE USE ONLY

DATE RECEIVED:

REVIEWED BY:

OFFICER AUTHORIZING CREDIT (PRINT & SIGN):

CREDIT TERMS: