



CUSTOMER ACCOUNT FORM

Customer Number: _____

I am applying for credit C.O.D only

Name of Licensee or Owner:	Retail Name:
Business Address:	Business City/State/Zip:
Business Telephone: Business Email Address:	Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/>
If sole proprietorship, list owner information; if partnership, list information for all partners; if corporation, list president, vice president and treasurer	
Owner or Partner or President Name:	Home Address:
Home Telephone: Email Address:	Home City/State/Zip:
Drivers License Number:	Social Security Number
<hr/>	
Partner or Vice President Name:	Home Address:
Home Telephone: Email Address:	Home City/State/Zip:
Drivers License Number:	Social Security Number
<hr/>	
Partner or Treasurer Name:	Home Address:
Home Telephone: Email Address:	Home City/State/Zip:
Drivers License Number:	Social Security Number
<hr/>	
Business Information - (please attach credit references)	
Bank:	Location:
Bank Account Number:	Bank Telephone Number:
How long has this business been in existence:	Other business affiliation doing business with Straub:
ABC License Number:	Resale Permit Number:

STRAUB DISTRIBUTING ALCOHOL CREDIT TERMS

Upon review of this application, you will be notified by our representative of what credit terms you will be granted. When a check is tendered in lieu of cash, and that check is returned by your bank for nonpayment, you will be assessed a \$25.00 return check charge and your account will revert to a cash basis. Section 25509 of the Alcoholic Beverage Control Act governs credit regulations between wholesaler and retailer and states that under no circumstances will a wholesaler allow a retailer to charge purchases when an invoice more than thirty (30) days old remains unpaid.

APPLICANTS' STATEMENT

1/We have reviewed this application and agree that it is true, correct, and complete to the best of our knowledge. You are authorized to confirm this information, and report information about my account to creditors and credit reporting agencies. Upon notification of the intention to sell your business, any outstanding balance shall be paid in full prior to the opening of escrow. In the event it becomes necessary for Straub Distributing Company to institute a lawsuit to collect amounts extended under this agreement, I/We agree to pay all court costs and such additional sums the court may deem reasonable as attorney's fees.

Signed:	
Owner or Partner or President:	Date:
Partner or Vice President:	Date:
Partner or Treasurer:	Date:

PERSONAL GUARANTEE OF CORPORATE DEBT

For Corporations, the personal guarantee is mandatory for all credit customers

As a condition of the extension of credit, I personally guarantee any debts incurred by this corporation to Straub Distributing Company. In the event it becomes necessary for Straub Distributing Company to institute a lawsuit to collect amounts under this guarantee, I agree to pay all court costs and such additional sums the court may deem reasonable as attorney's fees.

Signed:	Date:
---------	-------