



PLEASE REMIT TO:
DG FOODS CREDIT DEPT.
CREDIT@DGFOODS.NET

APPLICATION FOR CREDIT

DATE: _____

CHECK ONE: PROPRIETORSHIP PARTNERSHIP CORPORATION ENTITY TYPE (INC, LLC): _____

LEGAL COMPANY NAME: _____ DBA NAME: _____
PHYSICAL ADDRESS: _____ SHIP TO ADDRESS: _____
City, STATE, ZIP: _____ City, STATE, ZIP: _____
PHONE NUMBER: _____ PHONE NUMBER: _____
FAX NUMBER: _____ BUYER NAME/EMAIL: _____
FEDERAL ID NUMBER: _____ A/P NAME/EMAIL: _____

OWNERS, PARTNERS OR CORPORATE OFFICERS

OWNER/PRESIDENT: _____ ADDRESS/PHONE: _____
CONTROLLER/CFO: _____ ADDRESS/PHONE: _____
OTHER: _____ ADDRESS/PHONE: _____

DATE BUSINESS ESTABLISHED: _____ PO REQUIRED: YES NO

HAS THIS COMPANY, ITS OFFICERS OR PRINCIPAL OWNERS EVER DECLARED BANKRUPTCY OF ANY KIND? YES NO

PAYMENT METHOD: ACH WIRE CHECK FINANCIAL STATEMENT INCLUDED: YES NO

AMOUNT OF WEEKLY CREDIT DESIRED: _____ IF NO PLEASE EXPLAIN: _____

TRADE REFERENCES: LIST POULTRY REFERENCES WHOM YOU ARE DOING THE MOST BUSINESS (PHONE NO/FAX/EMAIL REQUIRED ON FORM)

COMPANY NAME: _____	COMPANY NAME: _____	COMPANY NAME: _____
CONTACT PERSON: _____	CONTACT PERSON: _____	CONTACT PERSON: _____
PHONE NUMBER: _____	PHONE NUMBER: _____	PHONE NUMBER: _____
FAX NUMBER: _____	FAX NUMBER: _____	FAX NUMBER: _____
EMAIL ADDRESS: _____	EMAIL ADDRESS: _____	EMAIL ADDRESS: _____

BANK REFERENCE (PHONE AND FAX NUMBER REQUIRED)	MUST LIST BANK INFORMATION ON THIS FORM: DEPOSIT/LOC/TERM LOAN
NAME: _____	BANK ACCOUNT #'S: _____
ADDRESS: _____	PHONE NUMBER: _____
TYPE OF ACCOUNT: _____	FAX NUMBER AND EMAIL: _____
	BANK OFFICER: _____

IF CREDIT IS EXTENDED BASED UPON THESE REPRESENTATIONS, THE APPLICANT AGREES TO PAY ANY OBLIGATIONS DUE IN ACCORDANCE WITH THE TERMS ESTABLISHED BY DG FOODS, NAMELY 7 DAYS NET. A LATE CHARGE OF 1.5% PER MONTH (18% ANNUAL PERCENTAGE RATE) WILL BE CHARGED MONTHLY ON ALL ACCOUNTS NOT PAID WITHIN TERMS. THIS IS A CONDITION OF ALL OF OUR SALES. WE AGREE HERewith TO PAY REASONABLE ATTORNEY'S FEES, COURT COST AND INTEREST IN THE EVENT IT BECOMES NECESSARY TO PLACE ANY ACCOUNT FOR MERCHANDISE, OWING BY ME/US IN THE HANDS OF AN ATTORNEY FOR THE FILING OF ANY LEGAL ACTION FOR THE COLLECTION OF MONIES OWED ON THE BASIS OF REPRESENTATION GIVEN IN THE CREDIT APPLICATION. ALL NEW BUSINESS WILL BE ON CASH BASIS UNTIL CREDIT IS APPROVED. ALL CREDIT ARRANGEMENTS ARE SUBJECT TO PERIODIC REVIEW.

I/WE HEREBY AUTHORIZE THE ABOVE NAMED BANK(S) AND TRADE SUPPLIERS TO RELEASE MY/OUR BANKING AND TRADE INFORMATION TO DG FOODS LLC.
I/WE HEREBY AUTHORIZE T DG FOODS LLC TO REQUEST CREDIT REPORTS.

SIGNATURE REQUIRED

COMPANY NAME: _____	
SIGNATURE: _____	SIGNATURE: _____
TITLE/DATE: _____	TITLE/DATE: _____

THE PERSON EXECUTING THIS AGREEMENT HAS AUTHORITY TO BIND THE APPLICANT AND IS AUTHORIZED BY THE APPLICANT TO ENTER INTO THE CREDIT APPLICATION TERMS AND CONDITIONS.

THE EQUAL CREDIT OPPORTUNITY ACT (ECOA) PROHIBITS CREDIT GRANTORS FROM DISCRIMINATING AGAINST APPLICANTS ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, MARITAL STATUS OR AGE. THE FEDERAL TRADE COMMISSION ADMINISTERS COMPLIANCE WITH ECOA.