



CONFIDENTIAL CREDIT APPLICATION

6601 Downing Street
 Denver, CO 80229
 Phone: 303-287-3329
 FAX: 303-287-1273
 Toll Free: 1-800-447-3825

We welcome your interest in doing business with our company. For your convenience and to serve you more efficiently and completely we encourage the establishment of an open account. All of the information submitted with this application will be held in the strictest confidence and used solely for reference purposes within our credit department in order to determine a suitable credit limit.

Customer Information:	PLEASE SUBMIT COPY OF TAX ID LICENSE WITH THIS APPLICATION!		
Firm Name: _____	SSN # or FEIN: _____	Sales Tax no: _____	
Street Address: _____	City: _____	State: _____	Zip code: _____
Mailing Address: _____	City: _____	State: _____	Zip code: _____
Telephone: _____	FAX: _____	Email: _____	
Type of Business: Sole Proprietor: _____	Partnership: _____	Corporation: _____	LLC: _____
Year Business Established: _____	Under Present Ownership since: _____	Property Leased or Owned: _____	
If property leased please provide name of Landlord as well as phone number: _____			
OWNER OFFICE INFORMATION:			
Officer/Owner Names	Titles	Residence	DOB
1. _____			
2. _____			
3. _____			
TRADE REFERENCES:			
<i>(please list at least three from whom purchases are made on a direct credit basis)</i>			
Vendor Name	Address	Phone:	FAX:
1. _____			
2. _____			
3. _____			
PAYMENT TERMS:			
All payments will be due on the 15th of the month following the purchases. Any past due balances at the end of the month will be subject to a 2% finance charge per month (24% per year) and, at the discretions of the Credit Department, may be changed to a COD status.			
CREDIT/RETURN TERMS:			
Any returns or requests for credit on product must be submitted to Amato Wholesale Florist within 24 hours of receipt of product. In the event of the a credit request, Amato Wholesale Florist retains the right to request the product be returned for quality control or training purposes. A restocking fee of 15% will be incurred for any hardgoods being returned to stock. All Holiday and Sale items are Final Sales. No returns will be accepted.			
PERSONAL GUARANTEE:			
In consideration of any credit extended, I (we) the undersigned will individually and/or jointly guarantee full and prompt payment of all indebtedness by: (Firm Name) _____ incurred for merchandise furnished by Amato Wholesale Florist plus service charges and collection costs where applicable. Such guarantee shall remain in force until its revocation is acknowledged in writing to Amato Wholesale Florist. Such revocation shall not affect indebtedness incurred prior to the receipt of written notice.			
INDIVIDUAL: _____	<i>Signature</i>	<i>Title</i>	<i>Date</i>
INDIVIDUAL: _____	<i>Signature</i>	<i>Title</i>	<i>Date</i>
INDIVIDUAL: _____	<i>Signature</i>	<i>Title</i>	<i>Date</i>

I have read, understand and accept the above terms and personal guarantee information. I agree that I have provided true and accurate information to the best of my knowledge. I further authorize Amato Wholesale Florist to verify any and all references we have given that may be required to determine our credit capabilities and to request relevant information from credit reporting agencies.

APPLICANT: _____ DATE: _____