



GOLDEN GATE MEAT COMPANY, INC
 803 WRIGHT AVE.
 RICHMOND, CA 94804

ACCOUNTING@GGMEATCO.COM
PHONE 510-426-4274

CREDIT APPLICATION

NO APPLICATION WILL BE PROCESSED UNLESS COMPLETED IN FULL AND SIGNED

LEGAL NAME: _____

DATE OF APPLICATION _____

TRADE NAME: _____

FEDERAL TAX ID _____

TYPE OF BUSINESS _____

DATE ESTABLISHED _____

BILL TO ADDRESS _____

SHIP TO ADDRESS _____

PHONE _____

Type of account you are applying for:

Open account/terms: _____

Credit Line requested \$: _____

CREDIT CARD ACCOUNT:

NAME ON CARD _____

ACCT NO. _____ **EXP. DATE** _____

Credit Card: AMEX MASTERCARD VISA

(Please fill out info to the right for CC terms)

CC TERMS ___ **COD** ___ **7 days** ___ **15 days** ___ **Monthly**

BILLING ZIP _____ **CV CODE** _____

ARE YOU A CORPORATION? If so, please check appropriate type:

___ **SOLE PROPRIETORSHIP** ___ **PARTNERSHIP** ___ **CORPORATION (Type _____)**

SOLE PROPRIETOR, PARTNERS OR OFFICERS NAMES: (please include separate sheet if more than two names)

1) _____
NAME _____ **HOME ADDRESS (Street, City, Zip)** _____

EMAIL ADDRESS _____ **HOME/CELL PHONE #** _____ **SOCIAL SECURITY #** _____

2) _____
NAME _____ **HOME ADDRESS (Street, City, Zip)** _____

EMAIL ADDRESS _____ **HOME/CELL PHONE #** _____ **SOCIAL SECURITY #** _____

ACCOUNTS PAYABLE CONTACT:

CHEF/PURCHASING AGENT CONTACT:

NAME _____ **PHONE** _____

NAME _____ **PHONE** _____

EMAIL _____

EMAIL _____

TRADE CREDIT REFERENCES:

1) _____
COMPANY NAME / CONTACT _____ **PHONE / EMAIL** _____

2) _____
COMPANY NAME / CONTACT _____ **PHONE / EMAIL** _____

BANK REFERENCE:

NAME ADDRESS BRANCH

BANK CONTACT/PHONE CHECKING ACCT# SAVINGS ACCT#

REAL ESTATE OWNED: LEASED: LANDLORD CONTACT:

MORTGAGE BALANCE: ASSESSED VALUE: MONTHLY REAL ESTATE OR LEASE PAYMENT:

Is there a pending litigation against you or your business? YES NO

If "YES": Plaintiff: Amount of Controversy:

Has the firm or any of its principals ever been Bankrupt? YES NO

If "YES": Date of Bankruptcy: Where filed, County/State: Case #

AGREEMENT / APPLICANT(S) SIGNATURE

Customer warrants that the financial information herein is based upon a thorough investigation of customer's records and is true and correct in all respects, and is made for the purpose of establishing an open account line of credit with Golden Gate Meat Company, Inc. (GGMC). GGMC is hereby authorized to obtain any information from any source concerning the statements and information in this application that GGMC considers necessary. It is understood by customer that GGMC shall make extensions, renewals and refinance of credit relying upon this report and customer agrees to immediately notify GGMC in writing of any material changes in customer's financial status as reported herein as GGMC will continue to rely on this information for financial decisions relating to customer based on this information, as updated from time to time.

It is understood and agreed that all charges are to be paid at such location as directed by GGMC from time to time. Terms are set forth and granted to Customer as described below. Customer agrees to pay 2% per month or 24% per annum or the maximum rate allowable by law, on the declining balance of any past due invoice. Payments are to be made on the due date, in accordance with the terms of sale, failing which GGMC may take appropriate collection action. The payment or accrual of interest does not extend credit terms or defer payment of any past due bill, and Customer is subject to collection and/or legal action if any sum is not paid on or before the subject due date thereof.

Should credit be granted the undersigned hereby personally guarantees payment of all present and future debts owing to GGMC. If collection in any form is required, Customer and/or any Guarantor of Customer noted below shall be required to pay GGMC's attorney fees and costs in connection with any such collection action.

Applicant's signature attests financial responsibility, ability, and willingness to pay our invoice in accordance to the terms set forth.

Undersigned represents that he/she has the authority to execute this credit agreement on behalf of the business identified.

Name of Business Date

Print Name Title Signature of Principal/Guarantor(s)

Print Name Title Signature of Principal/Guarantor(s)

Upon Credit approval by Golden Gate Meat Company, you are hereby notified, your terms for payment of invoices, is set forth as:

_ COD _ 7 days _ 15 days _ 30 days net 10 _ CC Terms Date Grated

Authorized by GGMC representative Accepted /Acknowledged by Applicant