



Mike's Produce Service
MAIL: PO Box 290851
Port Orange, FL 32129
Office: 413 Oak Place 6D
Port Orange, FL 32127

Contact Information
Ph: (386) 760-8822

Email: mspecser@gmail.com
Web site: www.mikesspecialtyservices.com

APPLICATION FOR CREDIT

Customer Information

Firm Name _____ Phone _____ Cell _____
Street Address _____ City _____ State _____ Zip _____
Mailing Address _____ City _____ State _____ Zip _____
Type of Business _____ Date Established _____
Form of Business Corporation Partnership Proprietor
Anticipated Monthly Purchases \$ _____
Fed I.D. # _____ S.S. # _____
Occupational License# _____

Owners, Partners or Officers

<u>Name</u>	<u>Phone</u>	<u>Home Address</u>	<u>Title</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Accounts Payable Contact Person

Name _____ Phone _____ Fax _____

Trade References

<u>Name</u>	<u>Phone</u>	<u>Address</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Banking Information

Bank Name _____ Address _____ Phone _____

We the undersigned, agree to immediately notify Mike's Specialty Services of the above address of any changes in ownership of form of said business. This instrument shall remain in full force and effect until actual notice of revocation is received, by certified mail, by Mike's Specialty Services at the above address.

Terms of Sale --- net _____. The net is considered past due after the 15th of the month. Mike's Specialty Services reserves the right to impose a service charge of 1 ½% per month (18% annually), or the maximum amount allowed by law, to pay all costs of collections, including reasonable attorney's fees.

Signed and Delivered this _____ day of _____, 20____
Company Name _____

By _____ Title _____

By _____ Title _____

In order to introduce Mike's Specialty Services to extend credit to: _____

The undersigned does hereby absolutely, unconditionally and personally guarantee to Mike's Specialty Services the payment of all indebtedness and obligations of whatever nature Mike's Specialty Services as they come due or accelerated or are incurred after such date. The obligations hereunder shall be binding on the heirs, administration, successors and assigns of the undersigned.

(Personally and individually)

Date

(Personally and individually)

Date

FOR OFFICE USE ONLY

Approved: 7 Days 14 Days 30 Days

(Sales Representative)

Date