

-Oak Beverages-

INCORPORATED

Beer & Ale
Lic # 2010295
Bradley Parkway Extension
Blauvelt, New York 10913

Wine & Spirits
Lic #2149876
500 Bradley Hill Road Ste A
Blauvelt, New York 10913

Beer&Ale Wine & Spirits Both

CREDIT APPLICATION

Fax#845-353-3577

Customer # _____ DATE: _____

*LICENSEE NAME (PREMISE NAME) _____ *LICENSE NO. _____

*STORE NAME (DBA) _____

*STREET ADDRESS _____ *MAILING ADDRESS _____

*CITY _____ *ZIP _____ *CITY _____ *ZIP _____

*BUSINESS PHONE # _____ FAX # _____ E-MAIL ADDRESS _____

*EIN (or SOCIAL SECURITY) # _____ *SALES TAX CERTIFICATE # _____

SOLE PROPRIETOR PARTNERSHIP CORPORATION

*BUSINESS BANK NAME _____ *ACCOUNT NO. _____

*BANK ADDRESS _____ CITY _____ ZIP _____

*NAME(S) OF ALL OWNERS OR CORPORATE OFFICERS: (If more then (2) owners, please list others on back)

NAME _____ PHONE NO. _____

ADDRESS _____ CITY _____ ZIP _____

TITLE _____ *SOCIAL SECURITY NO. _____

BIRTH DATE _____ OWN HOME RENT NO. OF DEPENDENTS _____

NAME _____ PHONE NO. _____

ADDRESS _____ CITY _____ ZIP _____

• TITLE _____ SOCIAL SECURITY NO. _____

BIRTH DATE _____ OWN HOME RENT NO. OF DEPENDENTS _____

INTEREST ON
ARREARS

the parties hereto acknowledge that they are purchasing from Oak Beverages, Inc for the purpose of resale. The undersigned agree that interest on past due invoices will accrue At the rate of 8.5% per annum if the licensee is not incorporated, and at the rate of 18% per Annum if the licensee is a corporation, which interest shall begin to accrue from the date The invoice becomes past due.

PROVISION FOR
ATTORNEY'S FEES

If the purchasers default in making payments when due, and Oak Beverages, Inc. commences legal action for payment due for goods sold and delivered the undersigned Agrees to pay an additional 25% of the amount owed as and for attorney's fees.

GUARANTY OF
PAYMENT

In consideration of the extension of credit by Oak Beverages, Inc. to, _____ the undersigned hereby personally guarantee payment of all sums owed Oak Beverages, Inc.
By _____

x _____
Individual Guarantor

Salesman # _____ Route Sequence # : _____ (1-5 the day of the week you plan to call on the account 1=Mon 2=Tues 3=Wed 4=Thurs 5=Fri)

On Premise: YES () NO ()

Delivery Instructions: _____ Time: _____

Additional Information: _____

First Order: _____

Plumbing Call: Yes () No ()

One Flower Lane-Blauvelt, NY 10913-Tel:(845) 353-1800 (718) 652-8555

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