



44 HIGH STREET  
WEST NYACK NY, 10994  
WWW.OAKBEVERAGESINC.COM

**Beer & Ale**  
Lic # 2225704  
44 High Street West Nyack,  
New York 10994

**Wine & Spirits**  
Lic #1334091  
44 High Street West Nyack,  
New York 10994

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.

x \_\_\_\_\_

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 ( )

