



# Cold Storage & Handling, Inc.

524 Isis Avenue  
Inglewood, Ca. 90301  
Tel : (310) 348-1000  
Fax: (310) 348-1008

## CREDIT APPLICATION

**PLEASE PRINT / COMPLETE / SIGN & FAX TO (310) 348-1008**

Application Date: \_\_\_\_\_ Import: ( ) Trucking: ( ) Other, specify ( ) \_\_\_\_\_

Firm Name: \_\_\_\_\_ Years in Business: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail or Web site address: \_\_\_\_\_

( ) Corporation ( ) Partnership ( ) Proprietorship ( ) Other, specify \_\_\_\_\_

Name of Principal: \_\_\_\_\_ Title: \_\_\_\_\_

EIN Number (if applicable) \_\_\_\_\_

Bank Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Address: \_\_\_\_\_

Account Number(s): Checking: \_\_\_\_\_ Savings: \_\_\_\_\_

Credit References:

1. Name: \_\_\_\_\_ Telephone#: \_\_\_\_\_

Address: \_\_\_\_\_

Contact: \_\_\_\_\_ Fax # \_\_\_\_\_

2. Name: \_\_\_\_\_ Telephone#: \_\_\_\_\_

Address: \_\_\_\_\_

Contact: \_\_\_\_\_ Fax # \_\_\_\_\_

3. Name: \_\_\_\_\_ Telephone#: \_\_\_\_\_

Address: \_\_\_\_\_

Contact: \_\_\_\_\_ Fax # \_\_\_\_\_

Please indicate terms requested: US\$ \_\_\_\_\_ Days \_\_\_\_\_

We certify that the above information is true and correct. We fully understand the credit terms extended and agree to the full **and timely** payment of all **amounts billed**. Furthermore, the undersigned agrees to be personally responsible for any unsettled amount(s), payable directly to A1 Cold Storage & Handling, Inc upon request. **We agree that if full payment is not timely made that A1 Cold Storage & Handling, Inc shall be entitled to commence collection efforts, including suit, and that A1 Cold Storage & Handling, Inc shall be entitled to all collection costs, attorney's fees and interest at a rate of 1.5% per month, but no higher than the highest rate allowed by law.** This signature will **also** serve as written authorization for the release of financial information from the designated banking facilities **and credit references**.

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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### To be completed by A1 Cold Storage & Handling, Inc

Credit terms extended: US\$ \_\_\_\_\_ Days \_\_\_\_\_

Accepted by A1 Cold Storage & Handling, Inc.

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_