



Fresh For Your Success. Right For Our Environment.™

Duck Delivery Produce, Inc.
8448 NE 33rd Drive, Suite 120
Portland, OR 97211-2163
800-452-2481 Sales Office Toll Free
503-288-9380 Sales Office Phone

APPLICATION FOR CREDIT

Accounting Office Phone: 503-281-8400
Accounting Office Fax: 503-288-0800

Date of Application: \_\_\_\_\_

Exact Business Name

Phone Number

Billing Address

Fax Number

City State Zip Code

Accounts Payable Contact Name

Shipping Address

Accounts Payable Telephone Number

City State Zip Code

EIN (Employer Identification Number)

E-mail Address for Weekly or Monthly Statements

Business is a: [ ]Corporation [ ]Partnership [ ] Individual [ ]LLC

State of Formation: \_\_\_\_\_ Date Established: \_\_\_\_\_

The following information must be completed in full. All information will be held in strict confidence. BUSINESS OWNERSHIP

Name Title

Name Title

Name Title

FINANCIAL INFORMATION

Name of Bank Account Representative

Bank Address Phone Number

City State Zip Code Account Number

REFERENCES – Please complete the attached references sheet.

I hereby certify that all information on this form is correct. I fully understand your credit terms and payment will be made in accordance with the terms listed on the invoices of Duck Delivery Produce, Inc. Applicant acknowledges that this Application for Credit has not been accepted or approved until signed by an authorized representative of Duck Delivery Produce, Inc. and returned to Applicant. Applicant further acknowledges that as a condition of acceptance by Duck Delivery Produce, Inc., the owners of Applicant will be required to execute and deliver to Duck Delivery Produce, Inc., a personal guaranty of the obligations of Applicant in form and substance acceptable to Duck Delivery Produce, Inc. I hereby authorize all bank, financial institutions and supplier references to release credit information to Duck Delivery Produce, Inc.

Applicant Name Applicant Signature Date

Duck Delivery Produce, Inc. Authorized Representative Authorized Representative Signature Date



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## REFERENCES

(Vendors only. Do NOT list beverage and snack companies, landlords, construction firms, etc.)

### REFERENCE #1

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Fax Number

### REFERENCE #2

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Fax Number

### REFERENCE #3

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Fax Number

### REFERENCE #4

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Fax Number