P & F MEAT MARKET, INC. 3904 IRONWOOD PL. LANDOVER, MD 20785 FAX 301-773-4008 PH 301-773-4009

Credit Application

Ship to:	Bill to:
Name	Address
Trade Name	City, State, Zip
Address	Phone # and Fax# include area code
City, State, Zip	Accounts Payable Full Name
Phone #Purchasi	ng Agent(first & last name):
Purchase Order Number Required?	Yes No Federal ID#
Business Organization	
General Partnership Limited Par	tnership If Partnership, list general partners
-	(State?)
LLC	
	rchase Date: If No, Date Established
	Landlord Phone Number:
Complete the following information	for all Corporate Officers, General Partners, or an Individual
	please attach separate sheet listing all.)
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Name and Title	Name and Title
Home Address	Home Address
City, State, Zip	City, State, Zip
Home Phone Number	Home Phone Number
Social Security Number	Social Security Number

TRADE REFERENCES: List your three largest purveyors of foodservice product:			
Name	Address	Contact Name	Phone Number
1.			
2			
agree to pay according provided here is accurding our bank and supplier our credit history. In invoices for merchand fees, finance and late written notice to P & stock or assets of our	g to the terms and rate and may be as to furnish you the event of non dise received in a charges (subject F Meat Market pusiness. The u	and conditions of sale. We wanted a conditions of sale. We wanted upon in making your cany information necessary to appropriate the undersigned and addition to attorney's fees, control to the sale or transfer of andersigned agrees to provide	eredit decision. We authorize to complete your evaluation of grees to be liable for all unpaid ollection fees, return check
Printed Name:		Title:	
Customer Signature:		Date:	