



Recyclers of Food By-Products

www.ReConserve.com

# Credit Application

## Endres Processing of Minnesota

Attn: Cheryl Durden - Credit Department  
2811 Wilshire Blvd., Ste. 410  
Santa Monica, CA 90403  
Phone: 310-458-1574 ext. 240  
Fax: 310-451-5371

Business Name (Legal name of Company): \_\_\_\_\_ Number of Years in Business: \_\_\_\_\_

Social Security Number/Federal I.D. Number: \_\_\_\_\_

Type of Entity: CORP SOLE PROPRIETOR  PARTNERSHIP  LLC OTHER

Officers: President \_\_\_\_\_ Vice President \_\_\_\_\_

### YOUR BILLING ADDRESS AND COMPANY INFORMATION

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Area Code: \_\_\_\_\_ Number: \_\_\_\_\_ Ext: \_\_\_\_\_ Area Code: \_\_\_\_\_ Number: \_\_\_\_\_ Ext: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Amount of Credit Requested \$ \_\_\_\_\_K

### BANK INFORMATION

Institution Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Area Code: \_\_\_\_\_ Number: \_\_\_\_\_ Ext: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Fax: \_\_\_\_\_  
Area Code: \_\_\_\_\_ Number: \_\_\_\_\_ Ext: \_\_\_\_\_

Account Number: \_\_\_\_\_ ABA Number: \_\_\_\_\_

### TRADE REFERENCE INFORMATION

Name (1): \_\_\_\_\_ Phone: \_\_\_\_\_  
Area Code: \_\_\_\_\_ Number: \_\_\_\_\_ Ext: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Fax: \_\_\_\_\_  
Area Code: \_\_\_\_\_ Number: \_\_\_\_\_ Ext: \_\_\_\_\_

Name (2): \_\_\_\_\_ Phone: \_\_\_\_\_  
Area Code: \_\_\_\_\_ Number: \_\_\_\_\_ Ext: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Fax: \_\_\_\_\_  
Area Code: \_\_\_\_\_ Number: \_\_\_\_\_ Ext: \_\_\_\_\_

Name (3): \_\_\_\_\_ Phone: \_\_\_\_\_  
Area Code: \_\_\_\_\_ Number: \_\_\_\_\_ Ext: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Fax: \_\_\_\_\_  
Area Code: \_\_\_\_\_ Number: \_\_\_\_\_ Ext: \_\_\_\_\_

### TERMS:

Should credit be granted by Endres Processing, all decisions with respect to the extension or continuation of credit shall be at sole discretion of Endres Processing. Endres Processing, may terminate or modify credit availability anytime at its sole discretion. The customer agrees to pay all expenses and fees, including reasonable attorney fees for collection or enforcement thereof.

I understand and agree that payments are due upon Receipt of Invoice and I further agree to pay interest at the rate of 1.5% per month on any invoices not paid within thirty (30) days.

I understand and agree that invoices will not be discounted unless agreed to separately in writing and signed by an officer of Endres Processing.

All sales less than \$1,000.00 will be C.O.D. by check made out to Endres Processing at time of sale.

New customers must submit and sign a credit application and have credit approval prior to the first shipment, or pay C.O.D. with check on the first shipment and have credit approval before any other charges can be made. No shipments will be made to customers who are over their credit limit.

Customers over their credit limit must rectify the situation prior to further shipments or have an approved plan of action to be in compliance. This plan must be approved by an officer of Endres Processing.

### AUTHORIZATION TO RELEASE INFORMATION:

The undersigned warrants the above information to be true and authorizes a complete and full investigation by Endres Processing regarding the financial responsibility, indebtedness, character and reputation of the undersigned.

COMPANY NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

BY: \_\_\_\_\_ TITLE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_