



CONFIDENTIAL CREDIT APPLICATION

Please complete all sections online or print and return to:
Zeeland Food Services, Inc.TM
P.O. Box 290 • 2525 - 84th Avenue • Zeeland, Michigan 49464
800.748.0595 • 616.772.9042 • Fax: 616.772.7075

CUSTOMER INFORMATION

PLEASE CHECK ONE CORPORATION LIMITED LIABILITY COMPANY PARTNERSHIP SOLE PROPRIETOR

FULL LEGAL BUSINESS NAME _____

ADDRESS _____

BILLING ADDRESS _____

YEARS AT THIS ADDRESS _____ PHONE () _____

FAX () _____ DUNS # _____

FEDERAL ID # _____ DESIRED LINE OF CREDIT _____

FULL NAMES OF OFFICERS, PARTNERS, OR PROPRIETOR(S)

NAME	TITLE	ADDRESS	CITY/STATE/ZIP

BANK REFERENCES

BANK NAME _____ CHECKING ACCOUNT # _____

ADDRESS _____ SAVINGS ACCOUNT # _____

CITY _____ CONTACT _____

STATE & ZIP CODE _____ PHONE () _____ EXT. _____

TRADE REFERENCES

COMPANY NAME _____ COMPANY NAME _____

ADDRESS _____ ADDRESS _____

CITY/STATE/ZIP _____ CITY/STATE/ZIP _____

PHONE _____ FAX _____ PHONE _____ FAX _____

COMPANY NAME _____ COMPANY NAME _____

ADDRESS _____ ADDRESS _____

CITY/STATE/ZIP _____ CITY/STATE/ZIP _____

PHONE _____ FAX _____ PHONE _____ FAX _____

COMPANY NAME _____ COMPANY NAME _____

ADDRESS _____ ADDRESS _____

CITY/STATE/ZIP _____ CITY/STATE/ZIP _____

PHONE _____ FAX _____ PHONE _____ FAX _____

**CREDIT INFORMATION
RELEASE FORM**

I/we hereby authorize the release of information deemed necessary in connection with a consumer credit report for the approval or consideration thereof for purchases with Zeeland Food Services, Inc. This information is for the confidential use of ZFS.

A carbon or photo copy of this authorization may be deemed as equivalent of the original and may be used as such.

Your prompt reply will expedite this account line of credit consideration. Thank you for your assistance in providing this information.

Applicant's signature

Date

Applicant's signature

Date

PLEASE DO NOT WRITE BELOW THIS LINE

References checked by: _____

Credit approved by: _____

Reference results: _____

Credit amount approved: _____

Credit refused by: _____

Date of final credit review: _____



Zeeland Food Services, Inc.

CREDIT APPROVAL POLICY

The purpose of a credit policy is to assist our customers. This enables us to establish a method of payment that will fit each of our customers' needs. It also enables us to keep collection costs down and costs down for our valued customers.

CREDIT APPLICATION

All customers who wish to place charges on an account with Zeeland Food Services, Inc. need a signed and completed credit application on file with ZFS' accounting department. This application will assist us in establishing a credit limit that best suits you. We evaluate applications within two days and allow cash purchases until applications are processed. A credit disclosure form must also be reviewed and signed by the customer.

OVER CREDIT-LIMIT POLICY

Should a customer exceed the established credit limit, cash purchases can be made as long as account payments are up to date. If customers exceed their credit limit and do not pay their account in full by the due date, additional purchases will be allowed only when first approved by a supervisor and when an agreed payment on the amount overdue is included with a full payment for the new purchases. This must be established prior to picking up any new purchases. No discounts on applicable purchases will be allowed when an account is not paid in full within the terms of credit.

PAYMENT/LATE CHARGES

All invoices must be paid within the terms stated on the invoice (this could be cash on receipt or up to 20 days from receipt of invoice). If the invoice is not paid within these terms, a monthly 1.5 percent time-price differential charge will be added to the invoice. This 1.5 percent charge will accrue until the invoice is paid in full.

DEFAULT OF CREDIT TERMS

When a customer goes into default of the established credit terms, we will provide assistance as long as a regular payment schedule is established and regular payments are received. When no contact is maintained with the customer or when regular payments are not made, we use the full extent of the law to make collection on the balance owed. Service charges will continue to accrue on all balances until they are paid. All collection costs (legal fees, court fees, etc.) will be billed to the customer and the customer will be liable for said costs.

RETURNED CHECK POLICY

If a check is returned unpaid by your banking institution, the customer will be charged a \$25 processing fee. If the check does not clear the institution for payment when processed a second time, the customer will be charged another \$25 processing fee. The customer will then be contacted to bring in cash or a cashier's check for the full amount of the check plus processing fees. If payment is not received at the time arranged with the customer, the check and related information will be turned over to the proper authorities for legal action.

We hope these terms of credit are clear and will help maintain a mutually beneficial relationship between ZFS and its customers. We value our customers and their business.

By signing this policy, I acknowledge that I have reviewed the policy and agree with the terms established by this contract.

Applicant's signature

Date

Applicant's signature

Date