



Strictly From Scratch
 800 N 17th Ave
 Phoenix, Arizona
 Phone: 602.258.1158
 Fax: 602.258.1171
 WWW.SFSCRATCH.COM

Business Credit Application

Company Information

DATE _____

Name:		In Business Since:		
Legal Form Under Which Business Operates:				
Corporation <input type="checkbox"/>		Partnership <input type="checkbox"/>		Proprietorship <input type="checkbox"/>
If Division/Subsidiary, Name of Parent Company:			In Business Since:	
Address:	City:	State:	ZIP:	Phone:
EIN #				
STATE RESALE TAX #				

Bank References

Institution Name:	Telephone Number	Fax Number	
Checking Account #:	Routing Number		
Address:			
Banker Name(Contact)	Contact Phone:	Contact Fax:	

Ownership Information

Name:	Name:	Name:
Title	Title	Title
% ownership	% ownership	% ownership
Phone:	Phone:	Phone:
Email:	Email:	Email:

Sole Proprietor/Majority Shareholder, Please complete below

Last:	First:	Middle Initial:	Title
Phone			Fax
Home Address:			
City:	State:	ZIP:	SS#



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Responsible Party for Business Transactions

Last:	First:	Middle Initial:	Title
Phone			Fax
Address:			
City:	State:	ZIP:	E-MAIL

Accounts Payable Contact

Last:	First:	Title
Phone		Fax
EMAIL		
Address:		

OPERATING INFORMATION: We need a 2 hour delivery window. We deliver 10PM to 8AM, some locations may require a key drop to accommodate delivery window. Please share any questions or concerns with the Sales team.

Days	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Open	WE DO						
Close	DOT						
Delivery Window Times:	DELIVER						

Holiday Closed _____

Delivery Instructions _____

Chef, Manager, Ordering Contact Information

Name: _____

Phone: _____

Email: _____



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TRADE REFERENCES:

Principal Suppliers/ Credit References:

Company: _____ Contacts: _____
Fax: _____ Phone : _____ Terms _____

Company: _____ Contacts: _____
Fax: _____ Phone : _____ Terms _____

Company: _____ Contacts: _____
Fax: _____ Phone : _____ Terms _____



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Individual Personal & Company Guaranty

DATED: _____ 20__

I, _____
(Individual's Name)

residing at _____
(Individual's personal address, city, state, zip)

for and in consideration of **Sales Force Won! LTD, dba Strictly from Scratch Ltd**
extending credit to _____
(Name of Credit Applicant Company)

(hereafter referred to as the "Company") of which and in reliance on any guaranty of said credit, I _____, hereby personally guarantee to you the payment of any obligation of the Company and I hereby agree to bind myself to pay you on demand any sum which may become due to you by the Company whenever the Company shall fail to pay the same. It is understood that this guaranty shall be a continuing and irrevocable guaranty, and indemnity for such Indebtedness of the Company. I do hereby waive notice of default, nonpayment and notice thereof and consent to any modification or renewal of the credit agreement hereby guaranteed. The Officer(s) of the Company must sign below as individuals – signatures only, no corporate titles.

Social Security Number _____

Signature _____

Print Individual's Name _____

Dated _____

Witness signature _____

Print Witness Name _____

Address _____

Date _____

OFFICE USE ONLY

Credit terms Granted:

COD

7 DAYS

15 DAYS

***Credit Card**

A copy of the front and back of the payment credit card must be on file. Please fax to confidential fax line (602) 258-0660

*PLEASE FILL OUT CREDIT CARD FORM IF CHOOSING THIS PAYMENT TYPE

Customer waives required signature on delivery invoice _____ YES _____ NO (Check One)

STRICTLY Account Representative _____ Start Date _____ Account Reference Code _____

STRICTLY FROM SCRATCH



Credit Cards Accepted Visa/ MasterCard/ Discover / American Express

Strictly From Scratch Accepts all major credit cards for payment. If paying by credit card, a copy of the front and back of the card is required and must be faxed to our confidential fax line @ 602-258-0660. You can also send a copy electronically to doll@sfscratch.com.

Credit Card Terms: Charges are processed weekly. The billing period is Monday through Sunday. A statement is generated and payment is Processed. Customers will receive a copy of both, unless other arrangements have been made in advance. All credit card payments processed through Strictly From Scratch are subject to a 4% surcharge.

Please Initial Here
X

Type of Card _____ **Visa** _____ **MasterCard** _____ **Discover** _____ **American Express**

Name on Card _____

Phone# _____ **Fax:** _____

C.C# _____

Exp _____ **Security Code** _____

Address CC Statement is Mailed to:

City _____ **State** _____ **Zip Code** _____

_____ **card to be kept on file** _____ **card to be used once**

By signing below, I agree to pay all invoices in full and I authorize Strictly From Scratch to charge the total amount, to my credit card listed above. I also understand the credit card terms.

_____ **Card Holder Signature**

_____ **Date**



Arizona Resale Certificate

**ARIZONA FORM
5000A**

This Certificate is to be completed by the purchaser and furnished to the vendor who shall retain it. Incomplete certificates must not be accepted in good faith.

SELLER INFORMATION

Seller: _____

Street Address: _____

City, State, Zip Code: _____

PURCHASER INFORMATION

1 Purchaser: _____ License number: _____

Street Address: _____

City, State, Zip Code: _____

2 I am engaged in the business of: _____

3 The property is purchased for resale and will be resold in the ordinary course of business.

4 Description of the property being purchased

5 Check Applicable Box: Single Purchase Certificate Period: _____ Through _____

CERTIFICATION

A seller that has reason to believe that the certificate is not accurate, complete or applicable to the transaction, may not accept the certificate in good faith and the seller will not be relieved of the burden of proving entitlement to the exemption. A seller that accepts a certificate in good faith will be relieved of the burden of proof and the purchaser may be required to establish the accuracy of the claimed exemption as provided in ARS § 42-5022. Subsequent use or consumption of the tangible personal property by the purchaser other than the sale in the ordinary course of business will subject the purchaser to the Arizona use tax. Willful misuse of this Certificate will subject the purchaser to criminal penalties of a felony pursuant to ARS § 42-1127.B.2.

I, (print full name) _____, hereby certify that these purchases are for resale and that the information on this Certificate is true, accurate and complete. Further, if purchasing as an agent or officer, I certify that I am authorized to execute this Certificate on behalf of the purchaser named above.

Signature of purchaser _____ Date _____

Title _____