

**Credit Application**  
**The Speach Family Candy Shoppe, Inc.**  
**2400 Lodi Street, Floor 1**  
**Syracuse, NY 13208**  
**315.478.3100 855.4.SCANDY 855.472.2639**  
For faster credit approval fax this form to: 315.478.4929

**General Information**

<hr/>			<hr/>		<hr/>	
Company Name			Date		Amount of Credit Requested	
<hr/>			<hr/>		<hr/>	
Billing Address			Billing Phone		Year established	
<hr/>			<hr/>		<hr/>	
City	State	Zip	Billing Fax		Business Hours Mon-Fri	
<hr/>			<hr/>		<hr/>	
Shipping Address			Shipping Phone		Business Hours Sat	
<hr/>			<hr/>		<hr/>	
City	State	Zip	Shipping Fax		Business Hours Sun	
<hr/>			<hr/>		<hr/>	
Type of Business/Event			Number of Stores or locations(List each address on separate sheet)			
<hr/>			<hr/>			
CORP PARTNER SOLE PROP. NON-PROFIT GOVERNMENT			YES NO			
Type of Ownership (Circle One)			Seasonal? (Circle One)			
<hr/>			<hr/>			
YES NO			State of Issuance			
Tax Exempt? (Circle One)			Tax ID Number or Tax Exempt Number			
<hr/>			<hr/>			
Web Address			General Email Address			
<hr/>			<hr/>			
Buyer Contact Name			Buyer Contact Phone		Buyer Contact Email	
<hr/>			<hr/>		<hr/>	
Accounts Payable Contact Name			Accounts Payable Contact Phone		Accounts Payable Contact Email	
<hr/>			<hr/>		<hr/>	
Business Owner's Full Name			Business Owner's Phone			
<hr/>			<hr/>			
Business Owner's Home Address			Business Owner's Email			
<hr/>			<hr/>			
City	State	Zip	Social Security Number (For Personal Guarantee Only)			
<hr/>			<hr/>			
Driver's License Number			State of Issuance		Expiration Date	
<hr/>			<hr/>		<hr/>	
			Own Rent Lease		Business Location (Circle One)	
<hr/>			<hr/>		<hr/>	

**Bank Reference**

<hr/>			<hr/>		<hr/>	
Name of Financial Institution			Bank Phone		YES NO	
<hr/>			<hr/>		Checking? (Circle One)	
<hr/>			<hr/>		<hr/>	
Checking Account Number			Bank Fax Number		YES NO	
<hr/>			<hr/>		Saving? (Circle One)	
<hr/>			<hr/>		<hr/>	
Bank Address			City		State Zip	
<hr/>			<hr/>		<hr/>	

## Open Account References

1st Company Name

Phone

Fax

Address

City

State

Zip

Current Terms

Products Purchased

Contact Name

2nd Company Name

Phone

Fax

Address

City

State

Zip

Current Terms

Products Purchased

Contact Name

3rd Company Name

Phone

Fax

Address

City

State

Zip

Current Terms

Products Purchased

Contact Name

**I authorize the release of all needed information from the banks, businesses, and trade references listed on this application for credit.**

Authorized Signature

Title

Date

Print Name

Phone

By making use of or accepting any extension of credit, the applicant agrees that: New York law shall govern the parties' relationship; that any contract involving such extension of credit is deemed made in Onondaga County, New York where venue in any action or question pertaining to such contract or extension of credit is to be. Any verdict award, or judgment in favor of The Speach Family Candy Shoppe, Inc. shall be without relieve from valuation and appraisal laws and shall include an award for reasonable attorney fees. All amounts not paid when due bears interest depending on the highest rate allowed by applicable law. The undersigned personally warrants his/her authority to so sign and bind. The undersigned personally guarantees the applicants obligations to The Speach Family Candy Shoppe, Inc. and retains a purchase money security interest in any goods purchased until paid in full. In the event that any provision hereof is unenforceable, then that provision shall be deemed severed from this agreement. The applicant herein hereby warrants that it/he/she/they would make any purchases from The Speach Family Candy Shoppe, Inc. as a merchant, and not as a consumer, and that no product is intended for the purchaser's own personal household use, but rather for resale or other commercial purposes.

Authorized Signature

Date

Print Name

Office Use Only:

Credit Limit:

Date:

Approval: