1820 E. Valencia Drive
Fullerton, CA 92831
714-447-FOOD (3663)
800-454-5728
www.vieleandsons.com

Serving the Food Industry Since 1958

New Customer Form/Credit Application

Form will be returned if both pages are not completely filled out and legible.

FOR OFFICE USE ONLY

Account #: _____ Sales Rep: _____ Credit Terms: _____

Company Name (Complete Legal Name)			DBA Name (if any)	
Business Address	City	State	Zip Code	Phone
Billing Address	City	State	Zip Code	Phone
Type of Business		How Long in Business?		Date Present Owner Began
Ever File Bankruptcy? ☐ Yes, Year_____ ☐ No		If Incorporated, Date of Incorporation		Federal ID Number
Business Hours	Managers Name		Credit Terms Requested: (If COD, no credit check will be run)	
Add to Email Mailing List ☐ Yes ☐ No	Email Address			Fax Number
Email Statements ☐ Yes ☐ No	Billing Email Address (if different from above)			

Principals, Partners, Officer:

Name	Social Security Number		Spouse's Name	
Home Address	City	State	Zip Code	Home Phone
Name	Social Security Number		Spouse's Name	
Home Address	City	State	Zip Code	Home Phone

COMPLETE IF YOU ARE APPLYING FOR CREDIT TERMS:

Trade References:

Name	Address	City	State	Zip Code	Phone Number
1.					
2.					

Bank References:

Bank Name	Account Type	Account #	Branch	Manager	Phone Number
1.					
2.					

Completed forms can be faxed to 714-459-7458 or emailed to accounting@vieleandsons.com

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Personal Guarantee:

Undersigned guarantees fully, without reservation or offset the payment of any sums due from the above notes "Applicant" in the event said Applicant fails to pay such sum when and as due. Undersigned waives notice of default and demand for payment and agrees to pay all expenses of collection, including reasonable attorney's fees and any applicable interest thereon. This guaranty shall be enforceable as to all. Undersigned hereby gives permission to use any tools necessary to determine credit worthiness. Debt, liabilities and obligations incurred, despite discharge and bankruptcy or despite adjustment of such debts, liabilities and obligations and solvency proceedings or pursuant to some other compromise with creditors. This instrument shall be a continuing guarantee and shall remain in full force and effect until written notice is received from the undersigned to be released from further or future liability hereunder.

X_____ _____ _____

Signature of Guarantor | Print Name | Date

If credit is granted (I)/(We) promise to pay bills when rendered. In the event payment is now made and (My)/(Our) account is referred to a collection agency (I)/(We) will pay all costs of collection. If legal action is required (I)/(We) will pay reasonable attorney's fees resulting from such action. In the event legal action is commenced to enforce this guarantee; any such action will be filed in Fullerton, California.

All returned checks will be subject to a processing charge of $15.00 each time a check is returned. All returned checks must be paid in full with a cashiers check, money order or cash. All returned checks not paid within 10 days of notification are subject to 3 times the amount of the check and debtor agrees to pay all legal and court fees applicable.

All applications are processed through Transunion or other credit processing agencies.

California Resale Certificate

☐ ***I do not have a resale certificate, my Federal TAX ID is:*** _____

I HEREBY CERTIFY:

1. I hold a valid seller's permit number, the number is:

2. I am engaged in the business of selling the following type of tangible personal property:

3. This certificate is for the purchase from Viele and Sons, Inc. of the item(s) I have listed in paragraph 5 below.
4. I will resell the item(s) listed in paragraph 5, which I am purchasing under this resale certificate in the form of tangible personal property in the regular course of my business operations, and I will do so prior to making any use of the item(s) other than demonstration and display while holding the item(s) for sale in the regular course of my business. I understand that if I use the item(s) purchased under this certificate in any manner other than as just described, I will owe use tax based on each item's purchase price or as otherwise provided by law.
5. Description of property to be purchased for resale:

6. I have read and understand the following:
For Your Information: A person may be guilty of a misdemeanor under Revenue and Taxation Code section 6094.5 if the purchaser knows at the time of purchase that he or she will not resell the purchased item prior to any use (other than retention, demonstration, or display while holding it for resale) and he or she furnishes a resale certificate to avoid payment to the seller of an amount as tax. Additionally, a person misusing a resale certificate for personal gain or to evade the payment of tax is liable, for each purchase, for the tax that would have been due, plus a penalty of 10 percent of the tax or $500, whichever is more.

Business Name:	
Name of Purchaser:	
Signature of Purchaser, Purchaser's Employee, or Authorized Representative:	
Printed Name of Person Signing:	***Title:***
If your Seller's Permit Number is valid for multiple addresses, list names/locations here:	

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