

BAGUETTE REPUBLIC

CREDIT APPLICATION

Company Profile

Company Name: _____

Business Name: _____

Address: _____

City _____ State _____ Zip +4: _____

Phone Number: _____ Fax: _____

Website address: _____

Entity classification Individual/Sole proprietorship Partnership

Corporation Other

Taxpayer ID: Social security Number (SSN): _____

Employer Identification number (EIN): _____

Business type Restaurant Catering Hotel

Coffee Shop/ Café Retail/Market Other

Business locations Single Multiple

Accounts Payable Information

Contact Name: _____ Title: _____

Phone Number: _____ Fax: _____

Email Address: _____

Ordering Information

Contact Name: _____ Title: _____

Phone Number: _____ Fax: _____

Email Address: _____

CREDIT TERMS – NET 15 DAYS – Alternate plans must be arranged by calling the office.

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