



Holden Produce New Account Information

*/Required Fields

Company Name*

Address*	
City*	
State, Zip Code*	
Phone #*	
Fax #	
Contact/ Chef*	
Cell #	
Acct/Payable*	
Phone #*	
Email*	
Delivery Instructions/Window*	
Truck Route	
Holden's Use Only	
Product List	
Holden's Use Only	
Sales Rep	
Holden's Use Only	
Online Ordering	
Notes/Comments	



Credit Application for A Business Account
Attention: Accounting/Credit Department
Phone: 617-889-2204 Fax: 617-884-4863

Legal Business Name: _____ DBA: _____

Type of Entity: _____ Years in Business: _____ SIC No: _____

Federal Tax ID #: _____ State of Corporation: _____

Mailing Address: _____

Physical Address: _____

Phone #: _____ Fax #: _____

Email Address: _____

President Name: _____ A/P Manager: _____

Can Invoices Be Sent Via Email? Yes or No

Would you like to be set up for online ordering? Yes No

Trade References (Company Name, Address, Phone #, Fax # & Contact)

1. _____
2. _____
3. _____

Bank Reference (Bank Name, Account #, Address, Phone #, Contact)

Terms: Net 14 Days

I(WE) understand and agree that any credit granted shall be paid promptly in accordance with credit grantor terms and agreements. I(We) also understand and agree that credit grantor may add legal rate of interest per month to any balance not paid in accordance with said terms and agreements. I(We) also agree, in the even of default, to pay reasonable collection charges.

The perishable agricultural commodities listed on this invoice are sold subject to the statutory trust authorized by Section 5(c) of the Perishable Agricultural Commodities Act, 1930 (7 USC 499(e)(c)). The seller of these commodities retains a trust claim over these commodities, all inventories of food or other products derived from these commodities, and any receivables or proceeds from the sale of these commodities until full payment is received.

With my signature below, I certify the information above is correct and true, and I understand and agree the PACA guidelines outlined above. I authorize company personnel to contact the references provided.

Authorized By: _____ Date: _____



AUTHORIZATION FOR ACH PAYMENT

ACH is an electronic transfer of funds for the purpose of making a payment for product and services supplied by Holden Fruit & Produce Co., Inc. Any returned funds will be charged a bank return fee of \$35.

I (we) authorize HOLDEN FRUIT & PRODUCE CO., INC., ("THE COMPANY") to electronically debit my (our) checking/savings account at the financial institution listed below ("THE FINANCIAL INSTITUTION")

This authority will remain in effect until THE COMPANY is notified in writing to cancel it in such time as to afford THE COMPANY AND THE FINANCIAL INSTITUTION a reasonable opportunity to act on it.

FINANCIAL INSTITUTION: _____

ADDRESS, CITY, STATE, ZIP CODE: _____

ROUTING NUMBER: _____

ACCOUNT NUMBER: _____

CHECKING/SAVINGS ACCOUNT: _____

CUSTOMER NAME: _____

ADDRESS: _____

AUTHORIZED SIGNATURE: _____ DATE: _____