

Coca-Cola Bottling of Alaska USE ONLY
Account #
Credit Line \$
Terms
Approved

CREDIT and or COD APPLICATION

Instructions: Please indicate what type of account you are requesting. If you are requesting a credit account, all sections of

this application must be completed. Terms will default to COD if incomplete. Questions, please contact your sales representative, or the Corporate Credit department at Toll Free 1-800-767-6366 x1. **Terms Requested**: \Box Credit \Box COD \Box Other (EFT/EDI/Deposit) Credit Line Requested: \$_____ **COMPANY INFORMATION**
 Legal Business Name
 Phone (___)
 DBA Name (if different) Physical Address ______ Mailing Address ______ City/State/ Zip City/State/Zip Type of Organization (check One) — Corporation — Limited Liability Corporation — Partnership — Sole Proprietorship Date Business Started (mm/yy) ______ Business License # _____ Management Contact______Phone_(__) _____ E-mail____ Accounts Payable Contact_____ Phone_(___)___ Mailing Address _____ Fax E-mail **OWNERS OR PARTNERS/OFFICERS** Name_____Name____ Position Position Home Address Home Address City/ State/ Zip City/ State/ Zip Home Phone_____ Home Phone____ Employer Name_____ Employer Name_____ **COMPANY HISTORY** Yes or No Is applicant and/or guarantor currently a party in any lawsuit? Are there any unsatisfied judgments against applicant and/or guarantor? In the past seven years have you or any business, entity in which you participated either filed for bankruptcy or been granted a discharge in bankruptcy?

CREDIT REFERENCES

We are unable to use personal credit such as Sears, Visa, Utility Co., Bank Accts., Etc.

Account No	Account No
Name	Name
Address	
City/ State/ Zip	City/ State/ Zip
Phone_()	Phone_()
Fax	Fax
RELEA	ASE OF CREDIT INFORMATION
Coca-Cola Bottling of Alaska, LLC to conside	r extending credit to me/us,(Please print_your name)
I/ we authorize Coca-Cola Bottling of Alaska, and credit standing from any credit reporting a	, LLC to request a consumer credit report bearing on my/ our credit worthine gency.
DateSignature	
	TERMS & CONDITIONS
(Acknowledge	ement Required – Please initial applicable)
- Payment is due thirty (30) days or earlier	r from date of invoice for Credit accounts.
- If Credit account is past due and/or over	limit, shipments may be held.
– Payment is due at time of delivery for $\underline{\mathbf{C}}$	OD accounts.
- If a COD account has an unpaid balance	, shipments may be held.
- If ANY account has an unpaid NSF chec	ck(s) shipments will be held.
PERSONA	AL AND INDIVIDUAL GUARANTY
accommodations to the undersigned's corpora and conditions as may be agreed between so personally, individually, and irrevocably gua payment, immediately when due, or any and hereafter be owing or become due from the Bo demand, all reasonable costs and expenses, inc by the Company in enforcing the obligations ho one person, Guarantor's obligations hereunder	laska, LLC (the "Company") to grant or extend credit or other financial ation, partnership, or other business entity (the "Business") upon such terms uch Business and the Company, the undersigned (the "Guarantor") hereby tranties to the Company and its successors and assigns, prompt and full all indebtedness, including interest and late fees, now owing, or which may usiness of the Company. Guarantor further agrees to pay the Company, upon cluding attorney's fees, costs and expenses of collection that may be incurred thereby guaranteed or in enforcing this Guaranty. If the Guarantor is more than are joint and several.
shall continue absolutely, unconditionally and	l irrevocably. Guarantor hereby waives notice of acceptance of the Guaranty of dishonor, protest, and other notices of every kind of nature whatsoever.
DATED this day of	
Signature in individual capacity As Guarantor	Printed Name & SSN
Signature in individual capacity	Printed Name & SSN

As Guarantor