



BUSINESS CONTACT INFORMATION

DATE		
COMPANY NAME (LEGAL NAME)		
BUSINESS TRADE NAME (DBA)		
PHONE	WEBSITE	
BILLING ADDRESS		
CITY	STATE	ZIP CODE
PHYSICAL ADDRESS		
CITY	STATE	ZIP CODE
PHONE	EMAIL (CORPORATE EMAIL)	
CONTACT PERSON REQUESTING CREDIT		
PHONE	TITLE	

BUSINESS AND CREDIT INFORMATION

ACCOUNTS PAYABLE CONTACT		
ACCOUNTS PAYABLE EMAIL ADDRESS		
PURCHASING EMAIL ADDRESS		
DO YOU REQUIRE P.O. NUMBERS?		
☐ Yes ☐ No		
SHIP-TO ADDRESS		
SHIP-TO CITY	STATE	ZIP CODE





THE NUT PLACE, INC.

Business Credit Application (cont.)

Credit application for a business account · 2026

ADDITIONAL SHIP-TO ADDRESS (1)

ADDITIONAL SHIP-TO ADDRESS (2)

ADDITIONAL SHIP-TO ADDRESS (3)

BUSINESS TYPE

☐ Corporation ☐ Limited Liability Corporation ☐ Proprietorship ☐ Partnership

DATE ESTABLISHED

FEDERAL TAX ID #

TYPE OF BUSINESS

TAXABLE? (IF NO, PLEASE PROVIDE TAX EXEMPT FORM)

☐ Yes ☐ No

PREFERRED METHOD OF SHIPMENT

☐ Will Call Counter Sales Pickup ☐ Delivery by The Nut Place

☐ UPS ☐ FedEx ☐ UPS Collect ☐ FedEx Collect

ACCOUNT NUMBER

☐ Other (describe)

ACCOUNT NUMBER

BANK CREDIT INFORMATION

NAME OF BANK

ADDRESS

CITY

STATE

ZIP CODE

PHONE

CONTACT

CHECKING ACCOUNT #

LOAN #

BUSINESS/TRADE REFERENCES

Note: At least three good references are required to open an account. Email is required.

REFERENCE 1 — COMPANY NAME

ADDRESS

CITY

STATE

ZIP CODE





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Business Credit Application (cont.)

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PHONE

EMAIL

REFERENCE 2 — COMPANY NAME

ADDRESS

CITY

STATE

ZIP CODE

PHONE

EMAIL

REFERENCE 3 — COMPANY NAME

ADDRESS

CITY

STATE

ZIP CODE

PHONE

EMAIL

REFERENCE 4 — COMPANY NAME

ADDRESS

CITY

STATE

ZIP CODE

PHONE

EMAIL

REFERENCE 5 — COMPANY NAME

ADDRESS

CITY

STATE

ZIP CODE

PHONE

EMAIL





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Business Credit Application (cont.)

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CREDIT TERMS AND POLICY

- Everything stated in this application is true and correct to the best of my knowledge. It is understood you will retain this application whether or not it is approved.
- You are authorized to check our credit as necessary through our trade references, bank references, and/or a credit reporting agency to obtain answers about our credit experience.
- Further, in consideration of such extension of credit, it is understood that all bills shall be due and payable 30 days from the date of invoice; and further, upon failure to comply with these terms, my account will be placed on C.O.D. until the entire balance is paid.
- All parties further agree that, in the event legal action becomes necessary, the same will be filed and tried exclusively in Harris County, Texas.
- The undersigned further declares to The Nut Place, Inc., that he/she is duly authorized to sign this credit application form on behalf of the person and/or company herein represented.

AUTHORIZATION / SIGNATURE

NAME OF COMPANY

DATE SIGNED

SIGNATURE (TYPE FULL NAME TO SIGN ELECTRONICALLY)

TITLE

Please email this completed application to sales@thenutplace.com

HOW DID YOU HEAR ABOUT THE NUT PLACE?

Search Engine

☐

Website

☐

Salesperson – Name

☐

Referred By

☐

Other

☐