

# JOINT APPLICATION FOR CREDIT Portocork America



560 Technology Way • Napa CA 94558 • 707-258-3930 • 707-258-3935 (fax)

FIRM NAME \_\_\_\_\_ PHONE \_\_\_\_\_  
MAILING ADDRESS \_\_\_\_\_ FAX \_\_\_\_\_  
SHIPPING ADDRESS \_\_\_\_\_

PROPRIETORSHIP  PARTNERSHIP  CORPORATION YEAR EST. \_\_\_\_\_

NAME, PHONE NUMBER OF OWNERS/PARTNERS/OFFICERS (Please use full name and telephone number)

Name Title \_\_\_\_\_ Phone \_\_\_\_\_  
Name Title \_\_\_\_\_ Phone \_\_\_\_\_

REFERENCES - LIST 4 Suppliers (Please use full name, telephone and fax numbers)

Name Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Name Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Name Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Name Phone \_\_\_\_\_ Fax \_\_\_\_\_

## BANK ACCOUNT REFERENCE

Bank Name \_\_\_\_\_ Account Number \_\_\_\_\_

**BY EXECUTION OF THIS APPLICATION**, THE UNDERSIGNED AGREES THAT IF ITS CREDIT IS APPROVED BY PORTOCORK AMERICA, THEN SALES OF PRODUCTS BY PORTOCORK AMERICA, TO THE UNDERSIGNED SHALL BE SOLELY ON THE TERMS AND CONDITIONS OF SALE, INCLUDING WARRANTY AND LIABILITY LIMITATIONS, ATTACHED TO THIS APPLICATION FOR CREDIT.

**THE UNDERSIGNED CERTIFIES THAT THE ABOVE INFORMATION IS CORRECT**, THAT IT IS SUBMITTED FOR THE PURPOSE OF OBTAINING CREDIT, THAT THE UNDERSIGNED IS AUTHORIZED TO EXECUTE THIS APPLICATION, THAT THE UNDERSIGNED HAS READ THE TERMS AND CONDITIONS ACCOMPANYING THIS APPLICATION AND AGREED TO ALL OF THOSE TERMS AND CONDITIONS ON BEHALF OF APPLICANT.

### FOR OFFICE USE ONLY

Credit Approved:  Yes  No  
Terms: \_\_\_\_\_  
Credit Limit: \_\_\_\_\_  
Date Processed: \_\_\_\_\_  
Processed By: \_\_\_\_\_

\_\_\_\_\_  
AUTHORIZED SIGNATURE

\_\_\_\_\_  
DATE NAME

\_\_\_\_\_  
(PLEASE PRINT)

**IF YOU ARE EXEMPT FROM PAYING CALIFORNIA SALES TAX,  
PLEASE PROVIDE THE REQUIRED INFORMATION BELOW**

## WASHINGTON STATE RESALE CERTIFICATE

1. Name of Seller: \_\_\_\_\_
2. Name of Buyer/Business: \_\_\_\_\_
3. Address Of Buyer: \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_
4. Buyer's UBI/Revenue Registration Number: \_\_\_\_\_
5. Buyer is in the business of: \_\_\_\_\_
6. Types of items purchased for resale: \_\_\_\_\_

*The buyer certifies that it is purchasing the items listed on line 6 (please check appropriate box) for resale in the regular course of business without intervening use. For use as an ingredient or component part of a new article of tangible personal property to be produced for sale, as a chemical to be used in processing a new article of tangible personal property to be produced for sale, or for use as feed, seed, seedlings, fertilizer, or spray materials in it's capacity as a farmer.*

*The buyer acknowledges that it is solely responsible for purchasing within the categories listed on line 6. The buyer acknowledges that misuse of the resale privilege subjects the buyer to a penalty of 50 percent of the tax due, in addition to the tax, interest, and any other penalties imposed by law.*

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Name of Person Authorized by the Buyer to Sign the Resale Certificate

Signature of Authorized Agent of the Buyer

Effective Date: \_\_\_\_\_ through \_\_\_\_\_ Date Signed: \_\_\_\_\_

(Not to Exceed 4 Years)

Seller must maintain a copy. Please do not send to Department of Revenue.  
Reference Rule and Statute (RCW 82.08.130 and WAC 458.20.102)