



2727 E. Substation Road  
 Erie, MI 48133 – 9309  
 P: 1-877-CAT-TOY1  
 E: sales@edibleanimaltreats.com

# WHOLESALE SIGN UP

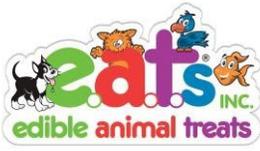
Please attach sales license or any other documents and email to [sales@edibleanimaltreats.com](mailto:sales@edibleanimaltreats.com), thank you so much!

Company Principle Responsible for Transactions. Name and Address of Business.

First:		Title:	
Last:		Cell Number (optional):	
Work Phone Number:		Email (required for account setup and invoicing):	
Name of Business:		Business Phone Number:	
Business Shipping Address:			
Business Websites:			
City:	State:	Zip:	

Company Information.

In Business Since:	FEIN#/Sales License:		
Parent Company if Different Than Above:			
Type of Business: Retail Pet Chain <input type="checkbox"/> Retail Pet Private <input type="checkbox"/> General Retail Chain <input type="checkbox"/> General Retail Private <input type="checkbox"/> Vet/Clinic/Other <input type="checkbox"/>			
Credit Line Requested:	Credit Terms Requested:    Net-30 <input type="checkbox"/> Net-60 <input type="checkbox"/> Net-90 <input type="checkbox"/> CC <input type="checkbox"/>		
Credit Card Number:	Exp. Date:		
Security Code:	CC Authorization Signature:		



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# WHOLESALE CREDIT REFERENCES APPRECIATED

**\*\*This form is not needed if you plan on paying with a credit card\*\***

If you would like Net-30,60 or even Net-90 terms, please fill out the following!

Open Account/Trade Credit References – Please at least two or please supply company forms, thank you!

Company Name/Email:	Company Name:	Company Name:
Contact Name:	Contact Name:	Contact Name:
Address/Web:	Address/Web:	Address/Web:
Phone:	Phone:	Phone:
Account Opened Since:	Account Opened Since:	Account Opened Since:
Credit Limit:	Credit Limit:	Credit Limit:
Current Balance: \$	Current Balance: \$	Current Balance: \$

I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and the conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein. All information is to be held in confidence.

Signature and Title \_\_\_\_\_

Date \_\_\_\_\_



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