

***Ice Cream & More***  
3419 Mexicali Street  
New Port Richey, FL. 34655  
Tel- (727) 457-0677 Fax- (727) 939-0089

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Business is a ( circle one ) : Sole Proprietorship      Corporation      Partnership

How long under present ownership: \_\_\_\_\_

Date Business Started: \_\_\_\_\_ Dun & Bradstreet Rating : \_\_\_\_\_

List names, addresses, phone numbers and position of the principals or officers of this organization.

Name : \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ City: \_\_\_\_\_

State \_\_\_\_\_ State: \_\_\_\_\_

& Zip: \_\_\_\_\_ & Zip: \_\_\_\_\_

Bus. Phone : \_\_\_\_\_ Bus. Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Position : \_\_\_\_\_ Position: \_\_\_\_\_

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& Zip: \_\_\_\_\_ & Zip: \_\_\_\_\_

Bus. Phone : \_\_\_\_\_ Bus. Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Position : \_\_\_\_\_ Position: \_\_\_\_\_

**Bank Information:**

Commercial Account : \_\_\_\_\_

Commercial Account Number : \_\_\_\_\_

Bank's Complete Address : \_\_\_\_\_

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Bank's Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Bank Officer: \_\_\_\_\_

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**List below credit references of three current suppliers:**

Firm: \_\_\_\_\_ Supplier of: \_\_\_\_\_

Complete Address: \_\_\_\_\_

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Phone Number : \_\_\_\_\_ Fax Number: \_\_\_\_\_

Contact : \_\_\_\_\_

Firm: \_\_\_\_\_ Supplier of: \_\_\_\_\_

Complete Address: \_\_\_\_\_

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Phone Number : \_\_\_\_\_ Fax Number: \_\_\_\_\_

Contact : \_\_\_\_\_

Firm: \_\_\_\_\_ Supplier of: \_\_\_\_\_

Complete Address: \_\_\_\_\_

---

Phone Number : \_\_\_\_\_ Fax Number: \_\_\_\_\_

Contact : \_\_\_\_\_

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UNTIL CREDIT HAS CLEARED THROUGH OUR ACCOUNTING DEPARTMENT, ALL SALES WILL BE DONE ON A C.O.D. BASIS. UPON RECEIPT AND ACCEPTANCE OF PRODUCT AT DOCK, TITLE AND LIABILITY FOR THE PRODUCTS PASS TO THE PURCHASER WITHOUT EXCEPTION. UPON RECEIPT OF PRODUCT, PURCHASER MUST CHECK FOR ANY TYPE OF DAMAGE PRODUCT. IF THERE IS ANY OBVIOUS DAMAGE AT THE TIME OF RECEIPT OF PRODUCT, PURCHASER MUST NOTIFY US IMMEDIATELY AT THE TIME OF DELIVERY WHILE SHIPPING AGENT IS STILL PRESENT. PURCHASER HAS TWO (2) DAYS TO NOTIFY US OF ANY UNSEEN DAMAGES TO PRODUCT WHICH WERE PRESENT BEFORE PRODUCT WAS RECEIVED BY PURCHASER. OTHERWISE, PURCHASER FORFEITS THE RIGHT TO MAKE ANY CLAIMS AGAINST US.

\_\_\_\_\_ hereby requests open account credit from Ice Cream & More and grant permission to Ice Cream & More to contact all individuals and/or corporations listed and gather required information therefrom. I (We) realize that our account must be paid within the terms granted and agree to pay a 1.5% monthly service charge on all past due invoices. I (We) further state that the information provided is accurate.

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Signature	Title	Date
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Signature	Title	Date
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Line of Credit Desired : \_\_\_\_\_