



**Santa Lucia Estate Coffee**  
615 Lofstrand Lane  
Rockville, Maryland 20850  
(240)483-4788  
(301)396-2192/fax

**CREDIT APPLICATION  
FOR A  
BUSINESS ACCOUNT**

**CONTACT INFORMATION**

Name/Title:  
Company name:  
Phone: Fax: E-mail:  
Address:  
City: State: ZIP Code:  
Date business commenced:  
Sole proprietorship: Partnership: Corporation:  
Owner(s) Name: Social Security #:

**CREDIT INFORMATION**

Billing address:  
City: State: ZIP Code:  
Telephone: Fax: E-mail:  
Bank name:  
Bank address: Phone:  
City: State: ZIP Code:  
Type of account Account number  
Savings  
Checking  
Other

**TRADE REFERENCES**

Company name:  
Address:  
City: State: ZIP Code:  
Phone: Fax: E-mail:  
Type of account:  
Company name:  
Address:  
City: State: ZIP Code:  
Phone: Fax: E-mail:  
Type of account:  
Company name:  
Address:  
City: State: ZIP Code:  
Phone: Fax: E-mail:  
Type of account:

**AGREEMENT**

- 1. All unpaid invoices are to be paid 30 days from the date of the invoice, unless other terms are established.**
- 2. Claims arising from invoices must be made within seven working days and client will agree to pay any court or collection fees**
- 3. By submitting this application, you authorize Santa Lucia Estate Coffee to make inquiries into the banking and business/trade references that you have supplied.**

**SIGNATURES**

Title: \_\_\_\_\_ Title: \_\_\_\_\_  
Date: \_\_\_\_\_ Date: \_\_\_\_\_