

Application Process and Requirements (IMPORTANT)

1. Please allow approximately 2 weeks for the process.
2. Application must be completed entirely.
3. Application must include years in business, amount of credit desired and must have a minimum of 3 references.
4. Incomplete applications WILL NOT be processed.



635 Ramsey Avenue
Hillside, NJ 07205
(908) 964-0477 Phone
(908) 964-1369 Fax

QUALITY YOU CAN TASTE...SERVICE YOU CAN COUNT ON. SM

BANK WRITTEN AUTHORIZATION FORM

Please provide Oasis Foods Company # 93791 and / or SEAFAX with information regarding my Credit History with your Bank.

I hereby authorize the release of this information for credit purposes.

Corporate Name of Applicant and Trade Name(s)

D/B/A

Authorization Signature and Title

Date



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DATE / / CREDIT APPLICATION SALESPERSON #

Please complete all of the following items (print or type):

COMPANY NAME

ADDRESS CITY STATE

TELEPHONE FAX ZIP

FEDERAL TAX ID NUMBER STATE OF INCORPORATION

BUSINESS ENTITY HOW LONG IN BUSINESS

OWNER SHIP Amount of Credit Desired

FULL NAME TITLE SS#

FULL NAME TITLE SS#

FULL NAME TITLE SS#

BANK REFERENCES

BANK NAME

ACCOUNT NUMBER CONTACT PERSON

BANK ADDRESS CITY STATE

TELEPHONE

TRADE REFERENCES

COMPANY

ADDRESS CITY STATE

TELEPHONE CONTACT PERSON

COMPANY

ADDRESS CITY STATE

TELEPHONE CONTACT PERSON

COMPANY

ADDRESS CITY STATE

TELEPHONE CONTACT PERSON

The undersigned ("Guarantor") represents that all the above information is true and acknowledges that Oasis Foods Company is relying on that information in potentially extending credit. Further, since the undersigned shall benefit from such credit, the undersigned shall bear full financial responsibility for all debts to Oasis Foods Company, and shall be personally liable and make good on all monies owed.

Guarantor Witness Date



1. Briefly describe the nature of your business and operations:

2. Briefly describe your customer base and geographical territory:

3. Do you currently purchase our product line? _____ If yes, from whom?

4. Do you currently purchase any product line from our competitor? _____
If Yes, from whom?

5. Were you a prior customer with Oasis? _____ if yes, Reason for not purchasing?

6. Anticipated estimated volume of purchase and frequency?
