



PROVISIONS
INTERNATIONAL

New Customer Form

completed forms should be emailed to info@provisionsintl.com or mailed to:
211 Olcott Drive, White River Jct., VT 05001
(802)291-6100 phone (802)291-6101 fax

Date _____ Legal Business Name _____

DBA _____ Federal Tax ID# _____

Business Type - Circle One:

Sole Proprietor Partnership LLC Corporation Other

Billing Street Address _____

City _____ State _____ Zip Code _____

Owner Name _____ Owner Phone Number _____

Requested Terms - Circle One *if no trade references are provided, then terms will be COD by default. Please attach references to application.*

COD - Cash or Check on Delivery Net 7 Days Net 14 Days

Business Type - Circle One:

Restaurant Retail Store Food Co-op Seasonal/Farmstand Distributor Other

Delivery address if different than billing

Street Address _____

City _____ State _____ Zip Code _____

Ok to Drop - Yes or No *circle one, if you authorize drops then the driver's initials will act as the invoice signature upon delivery for payment.* Do we need a key or door code? If yes please specify which _____

Billing/Accounting Contact Info *Statements will be emailed bi-weekly or as needed*

Name _____ Phone Number _____ Email _____

Name _____ Phone Number _____ Email _____

Authorized Buyers

Name/Title _____

Phone Number _____ Email _____

Name/Title _____

Phone Number _____ Email _____

Name/Title _____

Phone Number _____ Email _____

Ordering and Delivery Schedule

It is your responsibility to confirm emailed orders! We require a minimum of 48 hours notice for delivery on your next available delivery day, add ons can be placed until 3pm the day before your delivery however we can not guarantee fulfilment of late add ons. We deliver once a week. Please ask your salesperson what day of the week we deliver in your area.

Minimum Orders

Provisions International has a \$500 fulfilled order minimum for delivery.

Orders under \$500 will incur an additional charge.

Orders being picked up at our warehouse in West Lebanon, NH have a \$100 minimum and require a minimum of 24 hours notice.

Receiving and Returns Policy

It is Provisions' policy to get deliveries under cover. Our drivers are not responsible for unpacking, receiving, or storing orders. Please receive and check your deliveries in with care. We strive for accuracy, but errors do occur. Indicate any corrections both to our driver and on your invoice before you sign it and report any irregularities to our office immediately. All subsequent returns must be reported to our office within 3 business days and an authorization and credit memo may then be issued.

A copy will be sent to you upon return of the product and credit may then be applied to the corresponding invoice.

Returned product must be intact and in the original packaging in which it was delivered: i.e; cheeses that are cut, wrapped or labeled by a customer will not be eligible for credit.

No credits will be given for returns 30 days after purchase.

Payment Terms

The first 2 orders on new accounts shall be COD. Orders will not be shipped until a credit application is completed and approved, which takes an average of 3 business days.

If credit is approved, your terms and payment due date will be indicated at the top of your invoice. We offer ACH payment, credit card payment with a 2% processing fee as well as accepting checks, please no cash. Our drivers accept checks as a courtesy. It is your responsibility to submit payment so that we receive your payment within our terms.

All accounts with outstanding invoices beyond 30 days shall be subject to credit and delivery hold until past due invoices are paid in full or a proposed plan of payment on the delinquent amount is discussed and agreed upon by our accounting department. Any checks returned to us due to insufficient funds will incur a \$35.00 service charge plus an immediate replacement check for the original amount. A \$10.00 redeposit fee will be charged for each check when necessary.

Signature _____ Title _____

Printed Name _____ Date _____

Personal Guarantee Form

Personal Guarantee Form

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211 Olcott Drive, White River Jct., VT 05001

Date _____ Legal Business Name _____

DBA _____ Federal Tax ID# _____

Billing Street Address _____

City _____ State _____ Zip Code _____

The undersigned unconditionally, jointly and severally guarantee (s) payment to PIL Holding, LLC. DBA - Provisions International including any and all service charges, collections costs and attorney fees incurred as specified above, without prior notice or demand for all amounts heretofore or hereafter owed to PIL Holdings, LLC. including renewals and extensions of credit granted. The guarantee will cover all sales whether or not the terms of request are COD.

The undersigned hereby consent(s) to PIL Holdings, LLC. use of non-business consumer credit report on the undersigned principals, proprietors, and/or guarantors in connection with the extension of business credit as contemplated by this credit application.

The undersigned hereby authorizes PIL Holdings, LLC to utilize a consumer credit report on the undersigned from time to time in connection with the extension or continuation of business of the credit represented by this credit application. The undersigned a an individual(s) hereby knowingly consent to use of such credit report consistent with Federal Fair Credit Reporting Act as contained in 15 U.S.C.>@1681 et seq.

Signature _____ Title _____

Printed Name _____ Date _____

Home Address _____ Telephone Number _____

Driver's License Number & State _____ SSN# _____