



INGARDIA BROS. PRODUCE INC.

700 S. Hathaway Street • Santa Ana, CA 92705
Phone (949) 645-1365 • Fax (949) 645-2073

CREDIT APPLICATION

For the purpose of establishing credit and to apply for future purchases, the undersigned represents:

General Information:

Applicant (Legal Name) _____ Company Name (or dba) _____

Business Address _____ City _____ State _____ Zip _____

Company Phone () _____ FAX _____ Contact Name _____ Title _____

Type of Entity

Firm Name: _____ Telephone: _____

Address: _____ Fax: _____

City: _____ State _____ Zipcode: _____

Corporation (if you are using a fictitious business name, please include the fictitious business name.)

Limited Liability Company Resale #: _____

Limited Partnership Federal Tax ID #: _____

Partnership A.B.C. #: _____

Sole Proprietorship Business Start Date: _____

Owner, Partners or Corporate Officers (complete below)

1 Name _____ Title _____ Social Security # _____ Driver's License _____ State _____

Home Address _____ City, State, Zip _____ Home Phone () _____

2 Name _____ Title _____ Social Security # _____ Driver's License _____ State _____

Home Address _____ City, State, Zip _____ Home Phone () _____

3 Name _____ Title _____ Social Security # _____ Driver's License _____ State _____

Home Address _____ City, State, Zip _____ Home Phone () _____

Contact Information

Name of Owner/Officer: _____

Phone Number: _____ Fax: _____

Email: _____

Name of Owner/Officer: _____

Phone Number: _____ Fax: _____

Email: _____

General Manager: _____

Phone Number: _____ Fax: _____

Email: _____

Accounts Payable: _____

Phone Number: _____ Fax: _____

Email: _____