



## **CRUSH CREATIVE PACKAGING**

### **NEW CUSTOMER INFORMATION SHEET**

Thank you for your interest in our company. Enclosed is an Application for Credit with **CRUSH CREATIVE PACKAGING**. Please complete and return this form to establish your account with us. You may provide a standard list of references if you have one in lieu of completing the application, however, the **CRUSH CREATIVE PACKAGING** Credit Application must have an authorized signature. If you do not return this form, all orders will be processed as COD.

Below is a list of other pertinent information you may need to know about our company. We are happy to have you as a customer. If at any time you have any questions, please feel free to contact Wanda at the numbers noted below.

**Customer Service:** [Wanda@crushcreativepackaging.com](mailto:Wanda@crushcreativepackaging.com)  
Wanda Harmison  
**Phone/Direct:** (503) 905.3043  
**Fax/Direct:** (503) 905.3046

**Sales Manager:** [Carrie@crushcreativepackaging.com](mailto:Carrie@crushcreativepackaging.com)  
Carrie Higgins  
**Phone/Direct:** (503) 723.9200  
**Fax/Direct:** (503) 723.9400

**First Order Policy:** All first orders are COD unless other arrangements have been made. If you wish us to drop ship to your customer, we will gladly do so upon receipt of your payment in advance.

**Credit Application:** We check credit through trade references and Experian. We require 3 business days to process an application. All applications must be signed.

**Terms of Sale:** Upon credit approval, our standard terms are net 30. If no credit application is turned in, assume terms will be COD.

**Valid Re-Sale Cert:** **California, Washington, Idaho Customers, Please include a copy Of your original Resale or Exemption Certificate.**

**Payment:** We accept Checks, VISA, MasterCard, and American Express

**CRUSH CREATIVE PACKAGING**  
**PO BOX 2189**  
**LAKE OSWEGO, OREGON 97035**

**CRUSH...YOU'LL LOVE THE RESULTS!**



PO Box 2189  
Lake Oswego, OR 97035  
Fax: 503-905-3046

**NEW CLIENT SET-UP FORM/CREDIT APPLICATION**

**\*BUSINESS INFORMATION-Main Address:**

Name of Company: \_\_\_\_\_

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

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

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

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

\*Corporation \_\_\_ \*LLC \_\_\_ Partnership \_\_\_ Proprietorship \_\_\_

\* Fed Tax Id: \_\_\_\_\_ State and Date of incorporation \_\_\_\_\_

Type of business: \_\_\_\_\_ Date started: \_\_\_\_\_

Estimated credit required: \_\_\_\_\_ PO Required: Y / N

Buyer Name: \_\_\_\_\_ Buyer Phone: \_\_\_\_\_

Buyer Email: \_\_\_\_\_ Buyer Fax: \_\_\_\_\_

**\*SHIPPING INFORMATION (If different than Main Business Address):**

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

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Specific dock hours Yes No

**\*BILLING INFORMATION** : (Proprietorship or Partnership – Name of Person Responsible For Payment)  
(Corporation/LLC - Accounts Payable Contact Information)

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

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

Bill to Address: \_\_\_\_\_

City, State, Zip \_\_\_\_\_

**BANKING INFORMATION:**

Bank Name	Branch	Phone	Checking Account #
<b><u>TRADE REFERENCES:</u></b>			
Company Name	Phone #	Fax	Contact
1.			
2.			
3.			

More on reverse/next

Incomplete application will not be processed.

**\*PERSONAL GUARANTEE** –Must be completed by privately held corporations in business less than 3 years. The undersigned, personally, agrees to be bound by the obligation to pay on demand any sum which may become due by the Company whenever the Company shall fail to pay the owed amount. It is understood that this guarantee shall be a continuing and irrevocable guarantee and indemnity for such indebtedness of the Company.

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Signature	Name (printed)	Social Security #
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Signature	Name (printed)	Social Security #
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**\*\*Authorization to Obtain Consumer Credit Reports** – Crush Creative Packaging has my permission to obtain my personal credit information in the sole purpose of granting credit for business purposes.

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Signature	Name (printed)	Social Security #
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Signature	Name (printed)	Social Security #
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**TERMS AGREEMENT – Non- Equipment Sales:**

Terms: All first orders are COD unless credit approval has been confirmed. Payment terms upon credit approval are Net 30 unless otherwise negotiated in writing. By signing this document, customer is agreeing to payment within terms.

**TERMS AGREEMENT –Equipment Sales:**

Terms: Payment terms upon credit approval are Net 30 usually requiring deposits. By signing this document, customer is agreeing to payment within terms.

**CONDITIONS:**

If any amounts due remain unpaid beyond 30 days past terms, buyer agrees to pay a service charge of 1½% per month on that balance. Account balances that exceed 45 days past terms will be subject to credit review and may result in account becoming COD. Buyer shall be liable for costs associated with the collection of any amounts past due, including but not limited to attorney’s fees and court costs.

*The information contained herein is for the purpose of obtaining credit and is warranted to be true. I/We hereby authorize Crush Creative Packaging to investigate the references listed above pertaining to credit and financial responsibility.*



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Signature	Name (printed)	Title	Date
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Application must be signed by Officer or Authorized Individual in order to be processed.

**PLEASE ATTACH STATE SALES TAX EXEMPTION CERTIFICATE. STATE LAWS REQUIRES SALES TAX TO BE COLLECTED IF CERTIFICATE IS NOT PRESENTED PRIOR TO SALE.**