



TRADE CREDIT REFERENCES

1. _____
Supplier

Account Number

Address (Line 1)

Address (Line 2)

Telephone

Fax

Number of Years with Company

2. _____
Supplier

Account Number

Address (Line 1)

Address (Line 2)

Telephone

Fax

Number of Years with Company

3. _____
Supplier

Account Number

Address (Line 1)

Address (Line 2)

Telephone

Fax

Number of Years with Company

3. _____
Supplier

Account Number

Address (Line 1)

Address (Line 2)

Telephone

Fax

Number of Years with Company

Authorizing Signatory attests financial responsibility and willingness to pay in full within terms of sale on individual invoices. If the account is referred to a collection agency or attorney, the applicant agrees to pay all costs and expenses including attorney fees. All accounts with balances past due from date of terms are subject to a service/finance charge as stated on each invoice. In submitting this Application to open an account with Bidwell Cigar, Inc. you authorize Bidwell Cigar, Inc. to contact bank and trade references listed above. Terms refer to Net/Credit, COD, Due upon receipt or Credit Card.

Authorizing Signatory Signature _____ Date _____
 Printed Signatory Name _____ Title _____

PLEASE NOTE: APPLICATION WILL NOT BE PROCESSED WITHOUT COPIES OF OCCUPATIONAL AND/OR TOBACCO LICENSES.