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DATE:	: OPENING DATE:		SALES REP:		CUSTOMER ID:	
COMPANY NAME			DBA (IF DIFFERENT)			
BILL TO ADDRESS			СІТҮ		STATE	ZIP CODE
CONTACT			TITLE RECEIVING HOURS		s	
SHIP TO ADDRESS				CITY	STATE	ZIP CODE
OTHER DIVISIONS (ADDRESSES)				AMOUNT OF CREDIT REQUESTED		
ACCOUNTS PAYABLE PHO	ONE NUMBER		FAX NUMBER		ACCOUNTS PAYABLE EMAIL ADDR	RESS
TYPE OF BUSINESS			DATE ESTABLISHED		FEDERAL ID NU	MBER
CORPORATION	PARTNERSH	Р	SOLE PROPRIETORSHIP		LIMITED LIABILITY COMPANY	
Are you sales ta	ax exempt? 🗆 🖙	🗆 No	(IF YES PLEASE COMPLETE AN ER	NEST ITEI	MIZED RESALE CERTIFICATE)	
Have you ever h with us before?	nad credit 🛛 🖓 Yes	🗆 No				
			RESALE #			
TRADE REFERE	NCES					
NAME	ADDRESS		PHONE #		FAX/EMAIL ADDRES	S

I represent that the above information is true and is given to extend credit to the applicant. My company and I authorize credit investigation as Ernest Packaging Solutions, Inc. sees fit, including contacting the above trade references and obtaining credit reports. My company and I authorize all trade references, and credit reporting agencies to disclose to Ernest Packaging Solutions, Inc. any and all information concerning the financial and credit history of my company and myself.

We understand that the terms of sale require payment on or before the DUE DATE and agree to meet those terms. Delinquent invoices are subject to a late fee of 2% per month on the outstanding balance. All invoices are payable at 8730 Military Road #140, Reno, NV 89506. Applicant agrees that it shall be liable for and pay all of Ernest Packaging Solutions attorney's fees (including local counsel fees) experts fees, accountant fees, court fees, collection costs, collecting agency fees (if applicable) and any other expenses, whether or not incurred in connection with the enforcement of any of the terms of this application or resulting from default by Applicant, and/or in connection with the enforcement of any judgement or award rendered in favor of Ernest Packaging Solutions in connection herewith. This agreement shall be interpreted under the laws of the State of Nevada. Venue for any action brought by Ernest Packaging Solutions, to enforce any terms of this agreement, shall be in Washoe County, at the sole option of Ernest Packaging Solutions, Inc.

I have read the terms and conditions stated above and agree to all these terms and conditions "Including Tax Exempt Section."

AUTHORIZED SIGNATURE			PRINTED NAME	
TITLE			DATE	
DIVISIONS IN:	BOISE FRESNO HOUSTON LAS VEGAS	LOS ANGELES PHOENIX PORTLAND RALEIGH	RENO SAN LUIS OBISPO SACRAMENTO SALT LAKE CITY	
	EUGENE	MICHIGAN	SAN DIEGO	Reno - CREDIT APP rev 2/13/2024