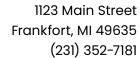




Thank you for choosing Graceland Fruit, Inc. We look forward to working with you!

To get started, please fill in the customer account set-up form below and the credit application form on page 3. When completed, please submit them to **orders@gracelandfruit.com**. If you have any questions, please do not hesitate to contact us.

Customer Account Set-Up			
New Customer Change Existing Custon Credit Limit Requested:	ner Duns # :		
COMPANY INFORMATION			
Full Legal Name of Company			
Trade Name or DBA (if applicable)			
Type of Business:			
Mailing Address			
Street Address:			
Street Address:			
City:	State/Province:		
Country:	Zip:		
Physical Address (if different)			
Street Address:			
Street Address:			
Street Address:			
City:	State/Province:		
Country:	Zip:		
Contact information			
Name:	Telephone:		
Email:	Website:		





PURCHASING INFORMATION	
Shipping Address	
Ship to Company Name:	
Street Address:	
Street Address:	
Street Address:	
City:	State/Province:
Country:	Zip:
Receiving Telephone:	
Orders/Purchasing Contact	
Name:	Telephone:
Email:	
Additional Orders/Purchasing Contact	
Name:	Telephone:
Email:	
ACCOUNTS PAYABLE INFORMATION	
Billing Address	
Street Address:	
Street Address:	
Street Address:	
City:	State/Province:
Country:	Zip:
Accounts Payable Contact	
Name:	Telephone:
Email:	Invoice Email:

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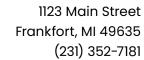
Credit Application

Please provide the following credit references to support your desired credit limit:

- Three (3) Trade References (from the USA, Canada, EU, Australia, or Japan)
- One (1) Bank Reference

REFERENCES	
Trade Reference #1	
Company Name:	Contact:
Street Address:	
Street Address:	
City:	State/Province:
Country:	Zip:
Telephone:	Email:
Date of Last Purchase:	
Trade Reference #2	
Company Name:	Contact:
Street Address:	-
Street Address:	
City:	State/Province:
Country:	Zip:
Telephone:	Email:
Date of Last Purchase:	
Trade Reference #3	
Company Name:	Contact:
Street Address:	
Street Address:	-
City:	State/Province:
Country:	Zip:
Telephone:	Email:
Date of Last Purchase:	

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Frankfort, MI 49635

Bank Reference	
Bank Name:	Bank Officer:
Branch Name:	
Street Address:	
	State/Province:
Country:	Zip:
Telephone:	Email:
Your Account Number:	
Customs Required Documentation (Please check	k all that apply)
USDA Certificate (\$100 Fee added to invoice)	
Certificate of Free Sale (\$65 Fee added to invo	ice)
Commercial Invoice	
Certificate of Analysis (COA)	
Certificate of Origin (COO)	
Other (Please specify):	
Other (Please specify):	
the attached credit reference detail our credit his Graceland Fruit, Inc.	unt with your firm, I hereby authorize and request that story with your firm be completed and forwarded to
Printed Name:	
Title:	Date:
Return this form to Graceland Fruit, Inc.	
Email:	
orders@gracelandfruit.com	
Mail:	
1123 Main Street	

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