



**CUSTOMER PROFILE AND BUSINESS CREDIT APPLICATION** (February 2020)

<b>TERMS REQUESTED (check one)</b>	
<p><b>Prepaid</b> (Payable with check, credit card or wire transfer.) After your first order you will receive an email with instructions on how to access CMG/BC's payment portal to pay for your order using a credit card (American Express, Discover, Mastercard or VISA). Payment can also be made with a check or wire transfer. Order is released for shipment after payment is received.</p>	
<p><b>Credit Card/Autobill</b> After your first order you will receive an email with instructions on how to access CMG/BC's payment portal where you will need to enter your credit card (American Express, Discover, Mastercard or VISA) information and authorize autobilling. (Note: These terms are only available for Country Malt Group or Brewcraft USA purchases.) Orders are shipped and the credit card on file automatically charged.</p>	
<p><b>Net 30 Days with</b></p>	<p><b>Line of Credit</b> (Credit card payments are <u>not</u> accepted on accounts with N30 terms.)</p>

**COMPANY INFORMATION**

Legal Name	Trade Name/DBA (if different from legal name)				
Business Structure (check one):	Corporation	LLC	Partnership	Sole Proprietor	Years In Business

**OWNERS/PRINCIPALS**

Name	Title	Phone	
Home Address	City	State	ZIP Code
Name	Title	Phone	
Home Address	City	State	ZIP Code

**BUSINESS INFORMATION**

Physical Address of Business	City	State	ZIP Code
Phone	Website		

**BUSINESS CREDENTIALS**

Federal Tax ID #	Business License #
Federal TTB or Brewer's Notice # (Required for a <b>brewery or brewpub</b> .)	
Distilled Spirits Plant Permit # (Required for <b>distillery, winery, cidery or meadery</b> .)	
Reseller's Permit # (Required for <b>homebrew supply stores</b> )	Expiration Date:

**BARRELAGE INFORMATION (Required for Breweries and Brewpubs – If not a brewery or brewpub go to next section, Owners/Principals.)**

Brewery System Size: # of Tanks:	# of Barrels Per Tank:	Annual Barrelage:
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**BILLING INFORMATION**

Bill To Address	City	State	ZIP Code
Name of Accounts Payable Contact	Position/Title		
Phone	Email Address		

**INVOICING & STATEMENT INFORMATION** (Note: Invoices and statements are sent via email.)

Email Address #1 for <b>Invoices</b> (Required)	Email Address #2 for <b>Invoices</b> (Optional)
Email Address #1 for <b>Statements</b> (Required if different from Invoices)	Email Address #1 for <b>Statements</b> (Optional)

**AUTHORIZED BUYERS** (required if applying for Credit Card/Autobill or Net 30 Terms) Note: Changes to authorized buyers must be submitted by email to newaccts@gwmalt.com.

NAME	TITLE	EMAIL ADDRESS
1.		
2.		
3.		

**SHIPPING INFORMATION** (If multiple ship to addresses, please attach separately.) Note: Changes to shipping locations must be submitted by email to newaccts@gwmalt.com.

Ship To Address	City	State	ZIP Code
Name of Purchasing Contact		Position/Title	
Phone	Email Address		

**TRADE REFERENCES** (Optional but may be requested if applying for a line of credit.)

<b>Reference #1</b> - Business Name	Email Address
Phone	FAX
<b>Reference #2</b> - Business Name	Email Address
Phone	FAX

I am authorized in my capacity to bind the above listed Company accordingly. The representations provided in this Application are complete and accurate. I understand the information provided will be relied upon in the evaluation and extension of credit terms. The terms and conditions of this Application shall, upon extensions of credit by Brewcraft USA Ltd., Canada Malting Company, The Country Malt Group, Great Western Malting (hereinafter referred to as the "Creditors"), constitute an agreement of sale. The Applicant agrees to be bound to the terms and conditions stated in this Application. The payment for all sales of goods or services will be according to the terms stated on the Creditors' invoice(s). The failure to pay on the due date of each invoice shall deem the debt to be delinquent. In the event of a delinquency, the Creditors may impose a late charge of two percent per month on the delinquent balance until paid. In the event of a delinquency, all collection expenses, including collection agency fees and costs, attorney's fees, and any court costs incurred in connection with the collection of the debt shall be due and payable by the Applicant.

Authorized Signature (Required) Printed Name Title Date  
**Please sign above. Must be actual handwritten signature. Digital, electronic or stamped signatures are not accepted. Unsigned applications will not be processed.**

**Personal Guarantee:** For and in consideration of your extending credit at my request to the above listed Company, I hereby personally guarantee to you the payment of any obligation of the Company and I hereby agree to bind myself to pay you on demand any sum which may become due to you by the Company. It is understood that this guaranty shall be a continuing and irrevocable guaranty and indemnity for such indebtedness of the Company. I do hereby waive notice of default, nonpayment and notice thereof, and consent to any modifications or renewal of the credit agreement hereby guaranteed.

Authorized Signature (Required) Printed Name Social Security # Date  
**Please sign above. Must be actual handwritten signature. Digital, electronic or stamped signatures are not accepted. Unsigned applications will not be processed.**

**Return completed form by email to [newaccts@gwmalt.com](mailto:newaccts@gwmalt.com) or by fax to 360-699-6790.**

Processing of applications takes one to three business days, so please submit your application well in advance of needing to place an order for products. Incomplete or illegible forms may experience delays in processing and/or be returned to for completion. Unsigned forms or forms signed electronically may be processed but assigned *Prepaid Only* terms until a signed application is received.

Once your account has been setup any changes to your information should be submitted by an owner or officer of your company as soon as possible to the Credit Management Team at [newaccts@gwmalt.com](mailto:newaccts@gwmalt.com) or by FAX to 360-699-6790.