



EZ NEW ACCOUNT APPLICATION

Please fill out form as best as possible to expedite the process.
For any questions, call **732-381-8110** or email **info@nourhan.com**.

COMPANY INFORMATION				
*Date	*Type of Seller <input type="checkbox"/> Retailer <input type="checkbox"/> Supermarket <input type="checkbox"/> Cash/Carry <input type="checkbox"/> Wholesaler <input type="checkbox"/> Distributor <input type="checkbox"/> Importer <input type="checkbox"/> Other			
*Company Legal Name			*Year Established	*Duns No. (If Available)
*Trade Name (If Different from Above)			No. of Locations	*Resale No. (Tax ID)
*Street Address	*City	*State	*Zip Code	*State Incorporated
*President's/Owner's Name	*Business Phone	*Mobile Phone	*Email	
*Buyer's Name	*Business Phone	*Mobile Phone	*Email	
*Accounts Payable Name	*Business Phone	*Mobile Phone	*Email	
*How did you hear about us?		*Key items of interest?		

DEFAULT AGREEMENT: The above information is for the purpose of obtaining a line of credit and is warranted to be true. I/We hereby authorize Nourhan Trading Group LLC or any of its subsidiaries to investigate the references listed pertaining to my/our credit and financial responsibility, and authorize my/our bank to release the information requested in conjunction with establishing this line of credit. I/We further attest financial responsibility, ability and willingness to pay invoices according to the terms of sale. In the event payment is not made, I/we will pay all reasonable costs of collection including all reasonable attorney's fees and court costs.

X _____	X _____
Authorized Applicant's Signature	Date
X _____	X _____
Print Name	Title

Any comments or queries (Enter Here)

Return the completed form via email at info@nourhan.com or fax at (732) 381-8108.