



90 Twinbridge Dr Pennsauken NJ 08110
phone: 323-486-8727 fax: 718-972-6044
email: info@bravopack.com

Thank you for your interest in establishing a wholesale account with Bravo Pack.

PREFERRED TERMS - CHECK ONE

COD- CHECK COD - MONEY ORDER CREDIT CARD NET 30 DAYS Business

Name: Federal ID / Sales Tax #:

Billing Address:

City: State: Zip:

Shipping Address:

City: State: Zip:

Business Phone: Fax: Business

Hours: E-mail: Web Site:

Date of Ownership:

Contact Name: Title:

Authorized Buyers:

1. 2. 3.

LIST ALL OWNERS:

Name:

Home Address:

City: State: Zip:

Home Phone: Email:

Name:

Home Address:

City: State: Zip:

Home Phone: E-mail:

Name:

Home Address:

City: State: Zip:

Home Phone: E-mail:

HOW DID YOU HEAR ABOUT US? TRADE SHOW WEB SEARCH EMAIL OTHER



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COMPANY NAME _____

Is your business a: Proprietorship Partnership Corporation LLC

TRADE REFERENCES:

Company: _____ Account #: _____ How Long: _____ YRS/MNTHS
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____

Company: _____ Account #: _____ How Long: _____ YRS/MNTHS
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____

Company: _____ Account #: _____ How Long: _____ YRS/MNTHS
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____

BANK INFORMATION:

Bank Name: _____ Branch: _____
Address: _____
City: _____ State: _____ Zip: _____ Bank
Phone: _____
Fax: _____ Business Name on
Account: _____ Business Checking Account #: _____



Application for Wholesale Account

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email: info@bravopack.com

Personal Guarantee
Sign and fax to 718-972-60044

I (We), _____(Company Name)
and _____(Individual Name)

certify that the information in this application is correct. I authorize you to contact my bank and credit references to obtain credit information. I agree to sellers terms: All invoices over 30 days are subject to a 2% per month finance charge (24% annually) on unpaid balances. All NSF checks are subject to a \$25.00 service charge each time returned. I agree to notify Bravo Pack, Inc. if any change of ownership occurs or if any other major change occurs in the way I conduct my business. I have printed a copy of this document and I understand its contents.

The undersigned, being an owner or stockholder of the above business, hereby agrees to pay any indebtedness by this business to Bravo Pack, Inc. from whom this business may purchase merchandise in the future. The undersigned also agrees to pay all attorney fees, court costs, collection costs, and all other expenses which may be incurred in collecting past due balances and insufficient funds check(s), as permitted by law

Signature #1: _____ Print Name: _____

Signature #2: _____ Print Name: _____