



**SAINT GERMAIN CATERING**  
*Food That Means Business*

**CORPORATE CREDIT ACCOUNT APPLICATION:**

Fax completed application to: 703-506-4323 or mail to: Saint Germain Catering • 8453-H Tyco Rd • Vienna, VA 22182.

Company Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Federal Tax Id#: \_\_\_\_\_ Sales Tax Exemption#: \_\_\_\_\_

**NAME(S) OF CORPORATE OFFICERS:**

\_\_\_\_\_  
Name Title

\_\_\_\_\_  
Name Title

**ACCOUNTS PAYABLE:**

\_\_\_\_\_  
Contact Name

\_\_\_\_\_  
Phone:

**BANK AFFILIATIONS:**

Branch: \_\_\_\_\_ Account Number: \_\_\_\_\_

Banker: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**CREDIT REFERENCES:**

Company Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Length Of Relationship: \_\_\_\_\_

Company Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Length Of Relationship: \_\_\_\_\_

\* \* \* \* \*

**The Corporation/Partnership Of \_\_\_\_\_**  
**Agrees That Whoever Signs This Application Is Hereby Authorized To Do So.**

**Signature Of Officer \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_**

Applications take approximately 7 days to process. Accounts are billed net 30. Interest and attorney's fees for late payments will be enforced on all outstanding invoices past 30 days. For questions please call (703) 506-9396 or (703) 506-9727.