



Deising's Bakery and Restaurant
109-121 North Front Street Kingston, New York 12401
Tel: 845-338-7757 Fax: 845-338-1327

**PLEASE FOLLOW THESE SIMPLE GUIDELINES FOR PLACING
YOUR WHOLESALE ORDER:**

1. ALL orders *must be called in by 3:00pm* for next day delivery. If you call AFTER 3pm, we can not guarantee that you will receive your order.
2. Please call with any questions during wholesale office hours from 9:00am – 5:00pm, Monday thru Saturday. The office is closed on Sunday's. (You may place your Monday order on Saturday.)
3. Wholesale phone number is 845-338-7757 OR 845- 338-7761

Following these simple guidelines will enable us to service you without complications. If you have any questions, please do not hesitate to call us during normal business hours. Thank you for your cooperation and we look forward to doing business with you.

If you would like to be added to our wholesale email list to inform you about new products or seasonal products, please provide that information below.

NEW WHOLESALE ACCOUNT SET UP:

Business Name:

Business Address:

Is billing and delivery address the same? Yes / No

If No, then billing address is:

Business Phone:

Business Fax:

Delivery Days:

Mon / Tues / Wed / Thur / Fri / Sat / Sun

Owner's Name:

Owner's Home Address:

Owners Home #

Owners Cell Phone:

Miscellaneous Information:

EMAIL ADDRESS: (To get price updates/product updates)

Deising's Representative approving credit: (office use only)

DEISING'S BAKERY AND PASTRY SHOP INC.
109-117 N. Front Street
Kingston, NY 12401

**CREDIT
APPLICATION**

Please print or type. Fill in all spaces and complete by signing where indicated. A signature must be that of an officer of the business/corporation. If ANY part of the application or of the personal guarantee is not completed or incorrectly completed, we cannot process the application.

LOCATION ADDRESS:

Trade Name of Business and address:

**BILLING
ADDRESS:**

Contact:

BUSINESS FACTS:

() Proprietorship () Partnership () Corporation Franchise _____

Federal Tax ID:

Purchase Date: _____

() New Owner? Yes / No

Length of time in
Business: _____

Building Facilities: () Owned () Leased () Rented

Previous Business Name: _____

Mortgage Holder / Lessor (Name) _____

Please complete the following information for all corporate officers, partners, or an individual proprietor.
(Please use the back of this form if more room is required)

Name and Title

Name and
Title

Home address

Home address

City, State, Zip

City, State, Zip

Home phone:

Home phone:

Social Security number

Social Security number

General Information:

Type of business: () Restaurant / fine dining () Family () Institutional () Pizza
() Hotel () Hospital () General Store () Deli () Catering Service

Please complete this page, if you are going to pay by credit card.

Credit Card charges:

I, _____, agree to allow Deising's Bakery to charge my credit card on a weekly basis for the amount that is due for my business account.

Name of business

Name on Credit Card

Signature

Credit Card Number to charge

Print Name / Title

Exp. Date

SEC code

Billing zip code

(This page MUST be signed in order to set up a wholesale account with Deising's Bakery.)

**DEISING'S BAKERY AND PASTRY SHOP INC.
PERSONAL GUARANTY**

FOR GOOD CONSIDERATION, the undersigned does hereby guarantee to DEISING'S BAKERY AND PASTRY SHOP INC. the prompt, punctual, and full payment of all present and future indebtedness to DEISING'S BAKERY AND PASTRY SHOP INC. from _____ according to the tenor of the within agreement and , in the event of default, authorizes any holder hereof to proceed against the undersigned, for the full amount due including reasonable attorney's fees and costs necessary for collection and enforcement of this guaranty, and hereby waives presentment, demand, protest, notice of protest, notice of dishonor, and any and all other notices or demand of whatever character to which the undersigned might otherwise be entitled. The undersigned further consents to any extension granted by any holder and waives notice thereof.

The obligations of the undersigned shall at the election of DEISING'S BAKERY AND PASTRY SHOP INC. be primary and not necessarily secondary and DEISING'S BAKERY AND PASTRY SHOP INC. shall not be required to exhaust its remedies as against _____ prior to enforcing its rights under this guaranty against the undersigned.

In the event more than one party executes this Guaranty as a guarantor, then EACH guarantor agrees to be jointly and severally liable for the guaranteed indebtedness and , in all instances herein, the singular shall be construed to include the plural.

In the event the account is turned over to an attorney or other agency for collection, the seller shall be entitled to recover it's reasonable attorney's fees and costs from any and all parties, including guarantor, liable for payment on this account, whether or not suit is instituted. In the event of any suit or legal proceedings involving this account, such reasonable attorney's fees shall include those fees and court costs incurred through trial and on appeal.

This guaranty shall be construed and enforced under the laws of the State of New York.

WITNESS the hand and seal of the undersigned this _____(day) of _____ (year).

X _____
Witness

X _____
Guarantor of Payment to Deising's

X _____
Date

X _____
Guarantor social sec. Number

Home address _____

Home Phone _____

Date _____

X _____
Witness

X _____
Guarantor of Payment to Deising's

X _____
Date

X _____
Guarantor social sec. Number

Home Address: _____

Home Phone _____

BANK REFERENCES:

Bank Name _____
Address _____
City, ST _____
Phone Num. _____
Account Number:
 Checking _____
 Savings _____

BANK REFERENCES

Bank Name _____
Address _____
City, ST _____
Phone Num. _____
Account Number:
 Checking _____
 Savings _____

CREDIT REFERENCES:

American Express
Acct Number _____

Visa / Mastercard
Acct. Number _____

TRADE REFERENCES

<i>Name</i>	<i>Address</i>	<i>Phone #</i>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

TERMS AGREEMENT:

The undersigned (Purchaser) agrees that all purchases made by Purchaser from DEISING’S BAKERY AND PASTRY SHOP INC. are subject to the following terms and conditions:

All amounts due for goods and services purchased from DEISING’S are payable at DEISING’S facility from which the goods and services are delivered. Purchaser acknowledges that such amounts are not payable in installments, but are payable IN FULL no later than 7 days after delivery of the goods or services.

In the event the account is turned over to an attorney or other agency for collection, the seller shall be entitled to recover it’s reasonable attorney’s fees and costs from any and all parties liable for payment on this account, whether or not suit is instituted. In the event of any suit or legal proceedings involving this account, such reasonable attorney’s fees shall include those fees and court costs incurred through trial and on appeal. Purchaser expressly agrees that this agreement shall be governed by the laws of the State of New York and jurisdiction and venue in any action or proceeding brought by either party to enforce or interpret this agreement shall be solely in Ulster County, New York.

Purchaser shall notify DEISING’S BAKERY AND PASTRY SHOP INC., by certified mail or any change of ownership of Purchaser. Purchaser warrants to DEISING’S that all financial information furnished for the purpose of obtaining credit is true, correct and complete in all material respects, and Purchaser authorized DEISING’S to investigate all references furnished pertaining to the credit and financial responsibility of Purchaser.

Date

Print name of Purchaser

Representative of Seller-Title

Purchaser’s signature and Title