



Discount Coffee.com, Inc  
 Dept. bizCREDIT<sup>®</sup>  
 501 North Service Rd  
 Saint Peters, MO 63376



**Application for bizCREDIT<sup>®</sup>  
 Net 20 Day Terms**

After completing this form, please email to [bizCREDIT@DiscountCoffee.com](mailto:bizCREDIT@DiscountCoffee.com) . You will be contacted shortly to finish establishing your account online, and a free personal training session on how to use your new online account.

\* indicates required field

**ANTICIPATED MONTHLY PURCHASE VOLUME:** \* \_\_\_\_\_ \$100.00 monthly minimum required

***Primary Account Holder Information for Online Account\****

Name (First & Last): \* \_\_\_\_\_ Title: \_\_\_\_\_  
 Billing Address: \* \_\_\_\_\_  
 City: \* \_\_\_\_\_ State: \* \_\_\_\_\_ Zip: \* \_\_\_\_\_  
 Email address: \* \_\_\_\_\_  
 Primary Telephone#: \* \_\_\_\_\_ 2<sup>nd</sup> Contact #: \_\_\_\_\_

***Accounts Payable Information\****

Customer Number: (Leave Blank) \_\_\_\_\_ (Will be assigned by Discount Coffee.com)  
 Accounts Payable Contact Name: \* \_\_\_\_\_ Email Address: \* \_\_\_\_\_  
 Full Legal Business Name: \* \_\_\_\_\_ Doing Business As: \* \_\_\_\_\_  
 Billing Address: (If different than above) \_\_\_\_\_  
 City: \* \_\_\_\_\_ State: \* \_\_\_\_\_ ZIP: \* \_\_\_\_\_  
 Primary Telephone: \* \_\_\_\_\_ 2<sup>nd</sup> Contact phone: \_\_\_\_\_  
 Federal Tax ID Number or SS#: \* \_\_\_\_\_ Date Business Started: \* \_\_\_\_\_  
 Number of Employees: \* \_\_\_\_\_ Company Web Address: \_\_\_\_\_  
 Do you use Purchase Order numbers? \*  Yes  No  
 Tax Exempt ID# \* \_\_\_\_\_  
 Are you presently 60 days or more past due with any supplier? \*  Yes  No

***Guarantor Information (Required)***

During the establishment of your account, DiscountCoffee.com will acquire the Guarantor Credit Card Information for this account. Credit Card information is kept on file and updated yearly. Accounts cannot be established without Guarantor information.

**Initials\***

- \_\_\_\_ I understand that my credit card **will only be charged in the event my account becomes delinquent.**
- \_\_\_\_ I understand that my account will be considered delinquent thirty (30) days past the invoice date and my credit card will be charged sixty (60) days past the invoice date if other payment has not been received.
- \_\_\_\_ I understand my NET 20 Terms Guarantee will expire (60) days prior to my Credit Card Expiration Date.
- \_\_\_\_ I agree to inform DiscountCoffee.com, Inc. of any changes to my credit card information.
- \_\_\_\_ I may cancel my authorization at any time by providing written notice to DiscountCoffee.com, Inc.
- \_\_\_\_ I acknowledge that a nominal charge will be placed against this card to validate authenticity at periodic intervals.

I hereby authorize DiscountCoffee.com, Inc. to maintain my signature on file and to charge my credit card (listed above) in the event that my account becomes delinquent.

**Cardholder Name:** \* \_\_\_\_\_  
**Cardholder Signature:** \* \_\_\_\_\_  
**Date:** \* \_\_\_\_\_

**TERMS:**

All of the information provided in this application is accurate and complete. You authorize DiscountCoffee.com, Inc. to verify the accuracy of all information contained in this application. Terms of payment are Net 20 days from the date of invoice. In the event of late payment, the undersigned agrees to pay finance charges of 1.5% per month (18% per annum) on the unpaid balance exceeding 30

days. If the account is placed in default the undersigned agrees to pay all costs thereof, including Attorney's fees, collection agency fees, court costs and any additional expenses in the collection of the bad debt.

**NOTE: WE DO PROSECUTE TO THE FULLEST EXTENT OF THE LAW ALL THEFT AND NON-PAYMENT OF INVOICES. Bankruptcies, dissolutions, and/or change of ownership does not dissolve the debt owed and collections are binding within in the law.**

DiscountCoffee.com, Inc is required to collect state sales tax for Missouri customers unless provided with a tax exempt certificate. A copy of your exemption certificate must be on file prior to your first order or taxes will be collected. Here are links to the required W-9 and Form 149. [Tax Payer Identification Form W-9](#) [Missouri Form 149 Tax Exemption](#)

The relationship and transactions between Customer and DiscountCoffee.com, Inc. shall be governed by the internal laws and decisions of the State of Missouri. This application is being delivered in Missouri and shall not be effective until accepted by DiscountCoffee.com, Inc. in Missouri. Venue shall be Missouri, and Customer hereby waives local venue and any objection relating to Missouri being an improper venue. At DiscountCoffee.com, Inc.'s election and determination, DiscountCoffee.com, Inc. may select an alternative forum, including arbitration, to adjudicate any dispute relating to the parties. To the maximum extent permitted by law, Customer hereby waives any right to jury of any claim, lawsuit or other proceeding arising with respect to its relationship or transactions with DiscountCoffee.com, Inc.

**Invoicing and Payment**

Invoices may be printed from your Account on the website DiscountCoffee.com and a hard copy will be included within each order when shipped. Please pay from these invoices; no additional billings will be made for payment.

Invoices are dated and are due within 20 days of said date. Payment can be made by business check, US Money Order, VISA, MasterCard, Discover, PayPal or American Express.

Please acquaint yourself with the User Agreement, Return Merchandise Policy and Terms & Conditions of Use. They are available at these links; [User Agreement](#), [Return Policy](#) , [Terms & Conditions of Use](#) .

***Signature for Credit Application \****

I hereby agree and accept the terms and conditions of credit with DiscountCoffee.com, Inc. I, as the below signee, make all representations that I can make binding contractual agreements between my company and DiscountCoffee.com, Inc. effective this day until such time as contract is terminated in writing between myself and DiscountCoffee.com, Inc or other named company representative. *(Your electronic signature is a binding mark of acceptance and meets all legal requirements for all states.)*

Authorized Representative of Company (print name\*) \_\_\_\_\_

Title: \_\_\_\_\_

Signature of Company Representative & Title: \* \_\_\_\_\_

Date: \* \_\_\_\_\_

**Email Completed Application To: [Doris@DiscountCoffee.com](mailto:Doris@DiscountCoffee.com)**

Phone: 636-278-1900 - FAX 636-278-1925 - Email: [bizCREDIT@discountcoffee.com](mailto:bizCREDIT@discountcoffee.com) Web: [DiscountCoffee.com](http://DiscountCoffee.com)

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