



Discount Coffee.com, Inc
 Dept. bizCREDIT©
 501 North Service Rd
 Saint Peters, MO 63376



**Application for bizCREDIT©
 Net 20 Day Terms**

After completing this form, please email to bizCREDIT@DiscountCoffee.com . You will be contacted shortly.

* 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#: * _____ 2nd 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: * _____ 2nd 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 thirty (30) 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:

You agree that All 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.

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 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 invoices 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: bizCREDIT@DiscountCoffee.com

Phone: 636-278-1900 - FAX 636-278-1925 - Email: bizCREDIT@discountcoffee.com Web: DiscountCoffee.com
Discount Coffee.com, Inc. 501 North Service Rd., Saint Peters, MO 63376



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Dept. bizCREDIT®
501 North Service Rd
Saint Peters, MO 63376



Credit Card on File Authorization Form

Please fill out the details as indicated below.

Card Holders Name:

(Exactly as it appears on the card) _____

Card No. _____

Expiration Date: _____

Card Type:

VISA [] MasterCard [] Discover [] American Express []

Card Holders Signature: _____

Date: _____

I have read and agreed to the bizCREDIT application policies, the User Agreement, Return Policy and Terms of Conditions of Use for DiscountCoffee.com. I hereby authorize DiscountCoffee.com to charge the credit card listed above for Invoices that have become delinquent after 30 business days.

This form will be kept on file and will remain in effect until the expiration date of the credit card account. Your bizCREDIT account will be suspended 60 days prior to the expiration of the credit card until a new card is submitted for the business account.

A new form must be submitted if information such as the list of authorized users and the credit card account's expiration date is amended. The applicant must also submit a written notification to DiscountCoffee.com if the credit card is cancelled, lost or stolen.

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