



Manzella Productions, Inc. 80 Sonwil Drive Buffalo, NY 14225-2425  
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## CREDIT APPLICATION

DATE: \_\_\_\_\_ NAME OF BUSINESS: \_\_\_\_\_ D/B/A: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_ FAX NO.: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

TYPE OF BUSINESS: \_\_\_\_\_ YEARS IN BUSINESS: \_\_\_\_\_

OWNERSHIP: CORPORATION ( ) PARTNERSHIP ( ) SOLE PROPRIETORSHIP ( ) INDIVIDUAL ( ) GOVERNMENT ( ) LLC ( )

CREDIT AMOUNT REQUESTED \$ \_\_\_\_\_ INITIAL ORDER \$ \_\_\_\_\_

LAST YEAR'S GROSS SALES \$ \_\_\_\_\_ GROSS SALES FOR YEAR PRIOR TO LAST YEAR: \$ \_\_\_\_\_

TYPE OF PURCHASE CONTROL SYSTEM: PURCHASE ORDER ONLY \_\_\_\_\_ PHONE \_\_\_\_\_ CONTRACTS \_\_\_\_\_ OTHER \_\_\_\_\_

BUYER: \_\_\_\_\_ ASST. BUYER: \_\_\_\_\_

ACCOUNTS PAYABLE MANAGER: \_\_\_\_\_ PHONE: \_\_\_\_\_

ORDER ATTACHED: \_\_ YES \_\_ NO BACKORDERS ACCEPTED: \_\_ YES \_\_ NO ACCEPT C.O.D.: \_\_ YES \_\_ NO ADVANCE PAYMENT: \_\_ YES \_\_ NO

### NAMES OF OFFICERS/OWNERS:

1. NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_ % OF OWNERSHIP \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

SOCIAL SECURITY NO. \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

FORMER / PRESENT AFFILIATED COMPANIES: \_\_\_\_\_ HOW RELATED? \_\_\_\_\_

PENDING LITIGATION? \_\_\_\_\_ IF YES, GIVE DETAILS: \_\_\_\_\_

EVER FILED BANKRUPTCY? \_\_\_\_\_ IF YES, GIVE DATE, CITY & STATE \_\_\_\_\_

2. NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_ % OF OWNERSHIP \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

SOCIAL SECURITY NO. \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

FORMER /PRESENT AFFILIATED COMPANIES: \_\_\_\_\_ HOW RELATED? \_\_\_\_\_

PENDING LINGATION? \_\_\_\_\_ IF YES, GIVE DETAILS: \_\_\_\_\_

EVER FILED BANKRUPTCY? \_\_\_\_\_ IF YES, GIVE DATE, CITY & STATE \_\_\_\_\_

### REFERENCES:

BANK: \_\_\_\_\_ BRANCH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE NO.: \_\_\_\_\_ CONTACT \_\_\_\_\_

TRADE REFERENCES: PLEASE INDICATE THE COMPANIES THAT CURRENTLY SUPPLY YOUR BUSINESS BY PROVIDING THE ACCOUNT NUMBER BELOW.

(PLEASE GIVE INFORMATION ON AT LEAST THREE OF YOUR VENDORS.)

ASICS \_\_\_\_\_  
CHAMPION PRODUCTS \_\_\_\_\_  
HIND, INC. \_\_\_\_\_  
OAKLEY \_\_\_\_\_  
ROCKY SHOES & BOOTS \_\_\_\_\_  
TIMBERLAND \_\_\_\_\_

BROWNING \_\_\_\_\_  
COLUMBIA SPORTSWEAR \_\_\_\_\_  
MARKER USA \_\_\_\_\_  
PATAGONIA \_\_\_\_\_  
RUSSEL ATHLETIC \_\_\_\_\_  
WIGWAM \_\_\_\_\_

BUCK KNIVES \_\_\_\_\_  
DUOFOLD \_\_\_\_\_  
NEW ERA CAP CO. \_\_\_\_\_  
REEBOK \_\_\_\_\_  
THOR-LO \_\_\_\_\_  
WOOLRICH \_\_\_\_\_

PLEASE FILL IN DETAILS ON THREE (3) SUPPLIERS:

SUPPLIER \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
FAX # \_\_\_\_\_ ACCT # \_\_\_\_\_  
PHONE # \_\_\_\_\_

SUPPLIER \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
FAX # \_\_\_\_\_ ACCT # \_\_\_\_\_  
PHONE # \_\_\_\_\_

SUPPLIER \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
FAX # \_\_\_\_\_ ACCT # \_\_\_\_\_  
PHONE # \_\_\_\_\_

SUPPLIER \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
FAX # \_\_\_\_\_ ACCT # \_\_\_\_\_  
PHONE # \_\_\_\_\_

REQUESTED CREDIT LINE: \_\_\_\_\_

The information contained in this application is provided for the purpose of obtaining or maintaining credit with you. The undersigned understands that you are relying on the information provided herein in deciding to grant or continue credit. The undersigned represents and warrants that the information provided is true and complete and that you may consider it as continuing to be true and correct until a written notice of a change is given to you by the undersigned. You are authorized to make all inquiries you deem necessary to verify the accuracy of the statements made herein to determine my credit-worthiness.

In signing this application, I am acknowledging and accepting that a service charge will be added to past due invoices on the 25th of each month in the amount of 1.5% (annual rate 18.0%). Merchandise may not be returned without prior authorization of Manzella Productions.

Furthermore, the undersigned (here in after referred to as the Guarantor(s)) personally guarantees payment to Manzella Productions, Inc. in the State of New York of any obligation of the Company should the Company fail to pay any sum due to Manzella Productions. This is a continuing guaranty applicable to all transactions between Manzella Productions, Inc. and the Company until this agreement is terminated by the Guarantor(s) via written notice of termination to Manzella Productions, Inc. at 80 Sonwil Drive Buffalo, NY 14225. Such notice shall apply only to future transactions and does not release Guarantor(s) of the obligation of transactions made prior to the date written notification is received by Manzella Productions, Inc. Once notice is sent to Guarantor of default, non performance or nonpayment by the Company of its obligation and liabilities pertaining to existing and/or future transactions between the Company and Manzella, Manzella shall be under no obligation to provide additional notice to the Guarantor(s). The Guarantor(s) hereby agrees that any disputes arising out of this agreement or goods and merchandise ordered or delivered pursuant hereto will be governed and settled under applicable principles of New York Law, under jurisdiction of New York Courts and that venue in any such action shall be in the County of Erie. Guarantor(s) agrees to pay all costs of collection, including Attorneys Fees. Guarantor(s) consents to any modification or renewal of the credit agreement hereby guaranteed.

**By signing this agreement, I acknowledge that I have read and understand the terms of sale and agree to abide by them.**

Signed: \_\_\_\_\_  
Full Company Name

Guarantor: \_\_\_\_\_ Date Signed: \_\_\_\_\_  
Signature (Individually – no titles)

\_\_\_\_\_  
Print Name

Witness: \_\_\_\_\_ Date Signed: \_\_\_\_\_  
Signature

Guarantor: \_\_\_\_\_ Date Signed: \_\_\_\_\_  
Signature(Individually-notitles)

\_\_\_\_\_  
Print Name

Witness: \_\_\_\_\_ Date Signed: \_\_\_\_\_  
Signature