



BREAKTHRU BEVERAGE COLORADO
 3980 Central Park Blvd • Denver, CO 80238 • 303.371.3421
 www.BreakthruBev.com
 Fax: 303.845.9156

NEW ACCOUNT INFORMATION

NOTE: A COPY OF THE CUSTOMER'S LIQUOR LICENSE MUST ACCOMPANY THE FORM BEFORE AN ACCOUNT WILL BE ESTABLISHED

CORPORATION NAME: _____

D.B.A: _____

SHIPPING ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

MAILING ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ FAX: _____ EMAIL ADDRESS: _____

A/P CONTACT NAME: _____ PHONE: _____ FAX: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

OWNER NAME: _____ HOME PHONE: _____

HOME ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

MANAGER NAME: _____ PHONE: _____

BUYER NAME: _____ PHONE: _____

DELIVERY INFORMATION: INFORMATION BELOW IS REQUIRED FOR ACCOUNT SET UP

	<u>TUE</u>	<u>WED</u>	<u>THR</u>	<u>FRI</u>
REQUESTED DELIVERY DAYS*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ACCOUNT HOURS OF OPERATION	OPEN:		CLOSE:	
REQUESTED DELIVERY WINDOW**	OPEN:		CLOSE:	
DO NOT DELIVER BETWEEN				
AREA DEMOGRAPHIC	URBAN <input type="radio"/>	SUBURBAN <input type="radio"/>	RURAL <input type="radio"/>	
ACCOUNT DELIVERY DEMOGRAPHIC	1 ST FL <input type="radio"/>	ELEVATOR <input type="radio"/>	STAIRS <input type="radio"/>	
DISTANCE FROM TRUCK TO DELIVERY	<75FT <input type="radio"/>	75 TO 150FT <input type="radio"/>	150FT+ <input type="radio"/>	
ACCOUNT TYPE (BAR, RESTRAURANT, EVENT, ETC.)				
SPECIAL COMMENTS				

*Delivery days are not guaranteed as certain areas may have specific delivery days assigned to them.

**Best efforts will be made to accommodate requested delivery window but cannot be guaranteed.



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CREDIT APPLICATION

DATE: _____
 CORPORATION NAME: _____ D.B.A.: _____
 ADDRESS: _____ PO BOX: _____ CITY: _____ ZIP: _____
 BUSINESS PHONE #: _____ BUSINESS FAX: _____ EMAIL: _____
 CORPORATION LIMITED LIABILITY CO LIMITED PARTNERSHIP
 PARTNERSHIP INDIVIDUAL BUS

CREDIT INFORMATION REQUIRED – ALL INFORMATION CONFIDENTIAL

BANK INFORMATION

BANK NAME: _____ ADDRESS: _____ CITY: _____ ZIP: _____
 BANK PHONE #: _____ CONTACT NAME: _____ ACCT #: _____

LICENSEE INFORMATION

NAME: _____ HOME ADDRESS: _____
 CITY: _____ STATE: _____ ZIP: _____ HOME PHONE #: _____
 SOCIAL SECURITY #: _____ DRIVERS LICENCE #: _____ STATE: _____
 FEDERAL TAX ID #: _____ STATE TAX ID #: _____

ADDITIONAL LICENSEE INFORMATION (IF ANY)

NAME: _____ HOME ADDRESS: _____
 CITY: _____ STATE: _____ ZIP: _____ HOME PHONE #: _____
 SOCIAL SECURITY #: _____ DRIVERS LICENCE #: _____ STATE: _____

INSURANCE INFORMATION

INSURANCE COVERAGE ON BUSINESS – FIRE \$: _____ THEFT \$: _____ LIABILITY \$: _____
 NAME OF INSURANCE COMPANY: _____
 CONTACT/BROKER: _____ PHONE #: _____

OWNERSHIP IN OTHER BUSINESSES CURRENTLY PURCHASING FROM BREAKTHRU BEVERAGE COLORADO – PLEASE LIST THE NAME (LICENSEE/OFFICER/PARTNER), POSITION HELD AND THE NAME AND LOCATION OF THE BUSINESS

NOTE – THE ATTACHED GUARANTY AND CLIENT RELEASE AUTHORIZATION FORM MUST BE COMPLETED. ANY MISSING INFORMATION WILL DELAY THE CREDIT REVIEW PROCESS. THE ABOVE INFORMATION IS GIVEN FOR THE PURPOSE OF INDUCING US TO EXTEND CREDIT TO THE UNDERSIGNED, IS REPRESENTED AND WARRANTED AS COMPLETE AND ACCURATE AND IT IS UNDERSTOOD THAT VERIFICATION MAY BE MADE OF SAID INFORMATION. THE UNDERSIGNED FURTHER AGREES THAT PAYMENT FOR MERCHANDISE PURCHASED ON CREDIT WILL BE MADE IN FULL, WITHIN 30 DAYS OF DELIVERY.

 (DATE)

 (PRINT LICENSEE NAME)

 (SIGNATURE OF LICENSEE)

The parties agree that the electronic signature of a party to this agreement, whether digital or encrypted, or transmitted by facsimile or by electronic mail, shall be valid as an original signature of such party and shall be effective to bind such party to this agreement



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CLIENT RELEASE AUTHORIZATION FORM FOR USE OF CONSUMER CREDIT REPORTS

LAST NAME: _____ FIRST NAME: _____ MI: _____

HOME ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

SOCIAL SECURITY #: _____ DATE OF BIRTH: _____

JOINT SPOUSE REPORT:

LAST NAME: _____ FIRST NAME: _____ MI: _____

HOME ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

SOCIAL SECURITY #: _____ DATE OF BIRTH: _____

The Undersigned hereby consent(s) to Breakthru Beverage use of a non-business consumer credit report on the undersigned in order to further evaluate the credit worthiness of the undersigned as principal(s), proprietor(s), and or guarantor(s) in connection with the extension of business credit as contemplated by this credit application. The undersigned hereby authorize(s) Breakthru Beverage to utilize a consumer credit report on the undersigned from time to time in connection with the extension or continuation of the business credit represented by this credit application. The undersigned as (an) individual(s) hereby knowingly consent(s) to the use of such credit report consistent with the Federal Fair Credit Reporting Act as contained in 15 U.S.C. @ 1681 et seq.

 (DATE)

 (PRINT NAME)

 (SIGNATURE)

 (DATE)

 (PRINT NAME)

 (SIGNATURE)

The parties agree that the electronic signature of a party to this agreement, whether digital or encrypted, or transmitted by facsimile or by electronic mail, shall be valid as an original signature of such party and shall be effective to bind such party to this agreement



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GUARANTY

Sir or Madam:

In consideration for and as inducement to you to extend credit and sell merchandise to:

 (CORPORATION NAME) (D.B.A.)

 (ADDRESS) (CITY) (STATE) (ZIP)

hereinafter called the "Customer", the Undersigned hereby unconditionally guarantees to pay you when due any indebtedness of the Customer heretofore or hereafter incurred for merchandise sold by you to the Customer, plus all costs and expenses, including reasonable attorney's fees, incurred in the collection of such indebtedness or enforcement of the guaranty.

This shall be an open and continuing guaranty and shall continue in force notwithstanding any change in form or amount of indebtedness or renewals or extensions of time granted by you without obtaining consent thereto, or by complete or partial release or settlement by you with the Customer, or any other person, and until expressly revoked by written notice received by you at your address sent by registered mail. Such revocation when received shall apply only to and affect indebtedness thereafter incurred.

Notice of every kind or nature, including but not limited to notice of acceptance of this guaranty, indebtedness and default in payments are hereby waived. This guaranty may be enforced by you against the undersigned without first proceeding against the customer, or any other person or guarantor. It is fully understood that there are no conditions or limitations to this guaranty except those stated herein.

Yours very truly,

_____ (DATE)	_____ (PRINT NAME)
	_____ (SIGNATURE)
	_____ (HOME ADDRESS)
	_____ (HOME PHONE #)
_____ (DATE)	_____ (PRINT NAME)
	_____ (SIGNATURE)
	_____ (HOME ADDRESS)
	_____ (HOME PHONE #)

The parties agree that the electronic signature of a party to this agreement, whether digital or encrypted, or transmitted by facsimile or by electronic mail, shall be valid as an original signature of such party and shall be effective to bind such party to this agreement



Sales Tax Exemption Certificate Multi - Jurisdiction

See page 2 for instructions

Last Name or Business Name		First Name		Middle Initial	
Address					
City				State	ZIP
I Certify That					
Name of Firm (Buyer)					
Address					
City				State	ZIP
Qualifies As (Check each applicable item)					
<input type="checkbox"/> Wholesaler		<input type="checkbox"/> Retailer		<input type="checkbox"/> Manufacturer	
<input type="checkbox"/> Political Subdivision or Governmental Agency		<input type="checkbox"/> Charitable or Religious			
<input type="checkbox"/> Other (Specify)					
If Other, specify here					
<p>1) and is registered with the below listed states and cities within which your firm would deliver purchases to us which are for resale or lease by us in the normal course of our business which is <input style="width: 150px;" type="text"/> or</p> <p>2) that such purchases are exempt from payment of sales or use tax in such states and cities because our buyer is:</p>					
<input type="checkbox"/> Political Subdivision or Governmental Agency		<input type="checkbox"/> Charitable or Religious		<input type="checkbox"/> Otherwise Exempt By Statute (Specify)	
If Otherwise Exempt By Statute, specify here					
City or State	State Registration or ID Number	City or State	State Registration or ID Number	City or State	State Registration or ID Number
City or State	State Registration or ID Number	City or State	State Registration or ID Number	City or State	State Registration or ID Number
City or State	State Registration or ID Number	City or State	State Registration or ID Number	City or State	State Registration or ID Number
<p>If the list of states and cities is more than six(6), attach a list to this certificate. I further certify that if any property so purchased tax free is used or consumed by the firm as to make it subject to a Sale or Use Tax we will pay the tax due direct to proper taxing authority when state law so provides or inform the seller for added tax billing. This certificate shall be part of each order which we may hereafter give to you, unless otherwise specified, and shall be called until canceled by us in writing or revoked by the city or state.</p>					
General Description of products to be purchased from seller					
Under penalties of perjury, I swear or affirm that the information on this form is true and correct as to every material matter.					
Authorized Signature (<i>owner, Partner or Corporate Officer</i>)				Title	
				Date (MM/DD/YY)	

To Our Customers:

In order to comply with the majority of state and local sales tax law requirements, it is necessary that we have in our files a properly executed exemption certificate from all of our customers who claim sales tax exemption. If we do not have this certificate, we are obligated to collect the tax for the state in which the property is delivered. If you are entitled to sales tax exemption, please complete the certificate and send it to us at your earliest convenience. If you purchase tax free for a reason for which this form does not provide, please send us your special certificate or statement.

***Lessor:** A form DR0440, "Permit to Collect Sales Tax on the Rental or Lease Basis" must be completed and submitted to the Department of Revenue for approval.

Caution To Seller: In order for the certificate to be accepted in good faith by the seller, the seller must exercise care that the property being sold is of a type normally sold wholesale, resold, leased, rented, or utilized as an ingredient or component part of a product manufactured by the buyer in the usual course of his business. A seller failing to exercise due care could be held liable for the sales tax due in some states or cities.

Misuse of this certificate by the seller, lessor, buyer, lessee, or the representative thereof may be punished by fine, imprisonment or loss of right to issue certificates in some states or cities.