CUSTOMER PROFILE FORM / BUSINESS CREDIT APPLICATION
INTERNATIONAL CUSTOMERS

COMPANY INFORMATION – *all required*

Legal Entity Name:		Trade Name/DBA (if different):		
Business Structure *(check one)*: ◉ Corporation ○ LLC ○ Partnership ○ Sole Proprietor			Years in Business:	
Type of Business *(check all that apply)*: ☑ Brewery ☐ Distillery ☐ Winery ☐ Meadery ☐ Cidery ☐ Non-malt Beverage ☑ Retail ☐ Food ☐ Other				

OWNERS / PRINCIPALS – *at least one is required*

Name:	Title:	Email:	Phone:	
Street Address:		City:	Country:	Postal Code:
Name:	Title:	Email:	Phone:	
Street Address:		City:	Country:	Postal Code:

BUSINESS ADDRESS – *physical address in country of origin*

Physical Street Address of Business:	City:	Country:	Postal Code:
Phone:	Website:		
Accounts Payable Contact:	Phone:	Email:	

SHIPPING / FREIGHT FORWARDER INFORMATION – *must be a US location, certified exporter*

Name of Freight Forwarder:			
Address:	City:	State:	Postal Code:
Name of Contact:	Position/Title:		
Phone:	Email:		

BUSINESS CREDENTIALS – *all required*

Importer # / EIN # / TAX ID #:	Business Registration from Country of Origin, *must be attached* Is Business Registration attached? ☐ Yes

PRODUCTION – *required for breweries and distilleries as applicable below*

Breweries - Annual Estimated Barrelage:	Distilleries – Annual Estimated Production:

BILLING INFORMATION – *all required*

Bill To Street Address:	City:	State:	Zip Code:

Billing Contacts (invoices sent via email) – *one Primary is required*

Primary	Name	Title	Email Address	Phone
○				
○				
○				
◉				

AUTHORIZED BUYERS *(Authorized individuals allowed to place orders on account)* – *one Primary is required*

Primary	Name	Title	Email Address	Phone
○				
○				
○				
◉				

DOCUMENTATION CONTACTS – *all required*

Type	Name	Title	Email Address	Phone
Cert of Analysis				
Export Docs				

SHIPPING INFORMATION *(If more than four addresses, please include all information separately)*

Primary Shipping Address (main shipping location) – *all required*

Onsite Contact Name:	Title:	Email:	Phone:	
Shipping Street Address:		City:	State:	Zip Code:

Does this location have a silo? ○ Yes ○ No

Second Shipping Address (other shipping location)

Onsite Contact Name:	Title:	Email:	Phone:	
Shipping Street Address:		City:	State:	Zip Code:

Does this location have a silo? ○ Yes ○ No

Third Shipping Address (other shipping location)

Onsite Contact Name:	Title:	Email:	Phone:	
Shipping Street Address:		City:	State:	Zip Code:

Does this location have a silo? ◯ Yes ◯ No

Fourth Shipping Address (other shipping location)

Onsite Contact Name:	Title:	Email:	Phone:	
Shipping Street Address:		City:	State:	Zip Code:

Does this location have a silo? ◯ Yes ◯ No

AUTHORIZATION

I am authorized in my capacity to bind the above listed Company accordingly. The representations provided in this Application are complete and accurate. I understand the information provided will be relied upon in the evaluation and extension of credit terms. The terms and conditions of this Application shall, upon extensions of credit by Canada Malting Company, The Country Malt Group, and Great Western Malting (hereinafter referred to as the "Creditors"), constitute an agreement of sale. The Applicant agrees to be bound to the terms and conditions stated in this Application. The payment for all sales of goods or services will be according to the terms stated on the Creditors' invoice(s). The failure to pay on the due date of each invoice shall deem the debt to be delinquent. In the event of a delinquency, the Creditors may impose a late charge of two percent per month, or the maximum amount permitted by applicable law, on the delinquent balance until paid. In the event of a delinquency, all collection expenses, including collection agency fees and costs, attorney's fees, and any court costs incurred in connection with the collection of the debt shall be due and payable by the Applicant.

Authorized Signature Name Title Date

Personal Guarantee: For and in consideration of your extending credit at my request to the above listed Company, I hereby personally guarantee to you the payment of any obligation of the Company and I hereby agree to bind myself to pay you on demand any sum which may become due to you by the Company. It is understood that this guaranty shall be a continuing and irrevocable guaranty and indemnity for such indebtedness of the Company. I do hereby waive notice of default, nonpayment and notice thereof, and consent to any modifications or renewal of the credit agreement hereby guaranteed.

Authorized Signature Name SIN# Date

Return complete & signed form to newaccts@souffletmalt.com

Please submit your application in advance of needing to place an order for products to allow time for processing. Incomplete or illegible forms will be returned for completion, so please be aware that orders will not process during this time.