

Dispensary Credit Application

Complete this application to request wholesale credit terms from the seller named below. The seller reviews every application and may approve, limit or decline credit.

Seller (your company): _____

1. Business information

Legal business name: _____

Trade name (DBA): _____

State cannabis license number(s): _____

License type and expiration date: _____

Store address: _____

Billing address (if different): _____

Federal tax ID (EIN): _____

Year the business started: _____

Business type (LLC, corporation, other): _____

2. Owners and contacts

Owner name, title and percentage owned: _____

Owner name, title and percentage owned: _____

Buyer name, email and phone: _____

Accounts payable contact, email and phone: _____

Email for invoices: _____

3. Credit requested

Payment terms requested: _____

Credit limit requested: _____

Expected monthly purchases: _____

How you will pay (e-check, ACH, check): _____

4. References

List your bank and at least two suppliers you buy from on terms.

Reference	Contact name	Phone or email	Account since

5. Terms the applicant accepts

If credit is approved, the applicant agrees to pay every invoice by its due date under the seller's payment terms in effect when the invoice is issued.

When an invoice is past due, the seller may hold new orders, ship them cash on delivery, lower the credit limit or end credit terms.

Late fees, interest and collection costs apply only where a signed agreement provides for them and the law allows them.

The applicant will tell the seller in writing within ten business days of a change in ownership, a change to its license status, or a sale of the business.

6. Authorization

The applicant authorizes the seller to contact the references above and to obtain business credit reports to evaluate this application, now and while the account is open. The information in this application is true and complete.

Signature

Printed name and title

Date (MM/DD/YYYY)

Company

For the seller

Approved terms and credit limit: _____

Approved by and date (MM/DD/YYYY): _____

Not legal advice — have your counsel review it before you use it.