

APPLICATION
Vision Cigar & Cigarette Wholesale, LLC

Legal Name		Trade Name (if different)	
Address			
City		State	Zip
Type of Business Organization <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other (Specify) _____			
Tobacco products related activities (mark all that apply) <input type="checkbox"/> Wholesale <input type="checkbox"/> Distributor <input type="checkbox"/> Retailer <input type="checkbox"/> Other (Specify) _____			
For above section submit valid Tobacco license copy along with application (mark all with attachment that apply) <input type="checkbox"/> Wholesale <input type="checkbox"/> Distributor <input type="checkbox"/> Retailer <input type="checkbox"/> Other (Specify) _____			
Person Responsible for Account		Phone	
Fax		Email	
Federal Tax ID		Tobacco License Number	
Sale Tax Resale Certificate Number			
Name(s) of Principals(s)			
Home Address			
Phone	Cell	Email	
Title		Social	

I certify that all information on this form is correct. I fully understand your credit terms and the undersigned personally guarantees proper payment in consideration of extended credit. This is a continuing guaranty relating to any indebtedness, including that arising under successive transaction. I hereby agree to bind myself personally and on behalf of my company to pay you on demand any sum which may come due to you by the business whenever the business shall fail to pay same. If deemed necessary to retain an attorney to enforce this agreement, or collect any past due account hereunder, then, whether or not suit is brought, I shall pay: All costs and expense incurred including a reasonable attorney's fee. All costs and expenses shall be included in the judgement and shall be secured by any liens. Guarantor waives all defenses of notice, presentment and demand.

Signature		Date
Print Name		Title

