



Coffee Marvel
Corporate Office
Dept. Corporate Accounts



Application for Corporate Account Net 20 Day Terms

After completing this form, please email to CustomerService@CoffeeMarvel.com . You will be contacted shortly to finish establishing your account online, and a quick personal training session on how to use and navigate within your account.

Please note - * indicates required field

ANTICIPATED MONTHLY PURCHASE VOLUME: * _____ \$100.00 monthly minimum required

Primary Account Holder Information for Online Account*

Name (First & Last): * _____ Title: _____
 Billing Address: * _____
 City: * _____ State: * _____ Zip: * _____
 Email address: * _____
 Primary Telephone#: * _____ 2nd Contact #: _____

Accounts Payable Information*

Customer Number: (Leave Blank) _____ (Will be assigned by Coffee Marvel)
 Accounts Payable Contact Name: * _____ Email Address: * _____
 Full Legal Business Name: * _____ Doing Business As: * _____
 Billing Address: (If different than above) _____
 City: * _____ State: * _____ ZIP: * _____
 Primary Telephone: * _____ 2nd Contact phone: _____
 Federal Tax ID Number or SS#: * _____ Date Business Started: * _____
 Number of Employees: * _____ Company Web Address: _____
 Do you use Purchase Order numbers? * Yes No
 Tax Exempt ID# * _____
 Are you presently 60 days or more past due with any supplier? * Yes No

Guarantor Information (Required for Select Businesses)

During the establishment of your account, Coffee Marvel will determine if Guarantor Credit Card Information is required for this account. The Guarantor Sheet is Included but may not be required for your account. **Contact us if you have questions.**

TERMS:

All of the information provided in this application is accurate and complete. You authorize Coffee Marvel to verify the accuracy of all information contained in this application. Terms of payment are Net 20 days from the date of invoice. In the event of late payment, the undersigned agrees to pay finance charges of 1.5% per month (18% per annum) on the unpaid balance exceeding 30 days. If the account is placed in default the undersigned agrees to pay all costs thereof, including Attorney's fees, collection agency fees, court costs and any additional expenses in the collection of the bad debt.

NOTE: WE DO PROSECUTE TO THE FULLEST EXTENT OF THE LAW ALL THEFT AND NON-PAYMENT OF INVOICES. Bankruptcies, dissolutions, and/or change of ownership does not dissolve the debt owed and collections are binding within in the law.

Coffee Marvel is required to collect state sales tax for Missouri customers unless provided with a tax-exempt certificate. A copy of your exemption certificate must be on file prior to your first order or taxes will be collected. Here are links to the required W-9 and Form 149. <http://www.irs.gov/pub/irs-pdf/fw9.pdf> <http://dor.mo.gov/forms/149.pdf>

The relationship and transactions between Customer and Coffee Marvel shall be governed by the internal laws and decisions of the State of Missouri. This application is being delivered in Missouri and shall not be effective until accepted by Coffee Marvel in Missouri. Venue shall be Missouri, and Customer hereby waives local venue and any objection relating to Missouri being an improper venue. At Coffee Marvel's election and determination, Coffee Marvel may select an alternative forum, including arbitration,

to adjudicate any dispute relating to the parties. To the maximum extent permitted by law, Customer hereby waives any right to jury of any claim, lawsuit or other proceeding arising with respect to its relationship or transactions with Coffee Marvel.

Invoicing and Payment

Invoices may be printed from your Account on the website CoffeeMarvel.com and a hard copy will be included within each order when shipped. Please pay from these invoices; no additional billings will be made for payment.

Invoices are dated and are due within 20 days of said date. Payment can be made by business check, USA Money Order, VISA, MasterCard, Discover, or American Express.

Please acquaint yourself with the policies and procedures of **Coffee Marvel**. They are available at these links; [Terms & Conditions](#) , [Privacy Policy](#), [User Agreement](#) .

Signature for Credit Application *

I hereby agree and accept the terms and conditions of credit with Coffee Marvel. I, as the below signee, make all representations that I can make binding contractual agreements between my company and Coffee Marvel effective this day until such time as contract is terminated in writing between myself and Coffee Marvel or other named company representative.

Authorized Representative of Company (print name)* _____

Title: _____

*Signature of Company Representative & Title: ** _____

*Date: ** _____

Email Completed Application To: CustomerService@CoffeeMarvel.com

Phone: 833-501-0667 - Email: CustomerService@CoffeeMarvel.com Web: www.CoffeeMarvel.com

Coffee Marvel
Corporate Office
Dept. Corporate Accounts
501 N. Service Rd.
Saint Peters, MO 63376

For office use: Coffee Marvel Account # _____
Approved By: _____ Date: _____



CoffeeMarvel.com

bizCREDIT© Guarantor Information Sheet

During the establishment of your account, Coffee Marvel will acquire the Guarantor Credit Card Information for this account. Credit Card information is kept on file and updated yearly. Select accounts cannot be established without Guarantor information on file.

Guarantor Information (Required for Select Businesses)

Initial Each line as acknowledging the rules of Guarantor Credit Card Use*

- ___ I understand that my credit card **will only be charged in the event my account becomes delinquent.**
- ___ I understand that my account will be considered delinquent thirty (30) days past the invoice date and this credit card will be charged thirty (30) days past the invoice date if other payment has not been received.
- ___ I understand my NET 20 Terms Guarantee will expire (60) days prior to my Credit Card Expiration Date.
- ___ I agree to inform Coffee Marvel. of any changes to my credit card information.
- ___ I may cancel my authorization at any time by providing written notice to Coffee Marvel.
- ___ I acknowledge that a nominal charge will be placed against this card to validate authenticity at periodic intervals, and that I will be given notice of such a charge in advance by Coffee Marvel.

I hereby authorize Coffee Marvel. to maintain my signature on file and to charge my credit card (listed above) in the event that my account becomes delinquent.

Cardholder Name: * _____

Cardholder Signature: * _____

Date: * _____

Payment/Authorization Information

Accepted Payment Methods: Visa, MasterCard, American Express, Discover

Credit Card number _____

Expiration Date (mm/yr) _____

Card Code* _____

*3 digit Card code is found on the back of Visa, MC & Discover

4 digit Card code is found on the front of American Express



Customer Billing Information for the Card on File:

First Name _____

Last Name _____

Company (if one) _____

Address _____

City _____

State _____

Zip Code _____

Phone/ Cell _____

Email address: _____

For office use: Coffee Marvel Account # _____

Approved By: _____ Date: _____