

COMMERCIAL KITCHEN PARTS & SERVICE

P.O. BOX 831128 • SAN ANTONIO, TX 78283-1128 • (210) 735-2811

**CREDIT APPLICATION/UPDATE
BILLING INFORMATION**

Company's Full Legal Name: Hidalgo County Facilities Management
 DBA or Subsidiary of: _____

A/P Contact Person: Daniel Flores / Manuel Garcia
 Billing Address: P.O. Box 1356

City: Edinburg State: TX Zip: 78539
 Phone: (956) 289-7850
 Shipping Address: 3106 S. Bus 281 Suite D

City: Edinburg State: TX Zip: 78539
 Phone: (956) 289-7850
 Fax: (956) 318-2648

BUSINESS DESCRIPTION

Type of Business: Government Entity
 Tax ID# 74-6000-717
 No. of Employees: _____

Corporation Partnership Partnership
 Types of Products You Will Purchase: Milk, Facets, Disposables, Ice Makers, etc
 Amount of Credit Requested: _____
 First Purchase: \$ _____ Monthly: \$ _____

Are purchase orders required? No Yes (all purchases) Yes (if over \$ _____)

BANK & TRADE REFERENCES

Please provide references that will verify credit usage similar to the credit that you are requesting.
 Food Suppliers Will Not Be Accepted As References

Trade References

#1 Company Name: Holz Defer Address: 801 Greenhorn Road City: McAllen State: TX Zip: 78504
 #2 Company Name: GAINOR Address: 901 E. Beck City: McAllen State: TX Zip: 78501
 #3 Company Name: Stewart Williams Address: 2223 S US Highway 281 City: Edinburg State: TX Zip: 78539
 #4 Company Name: Valencia Electric Address: 2804 N. Hidalgo City: McAllen State: TX Zip: 78517

BANK REFERENCES

Account # _____
 Phone # _____
 Contact Person _____
 Name of Bank _____
 Address _____
 City _____ State _____ Zip _____

I represent that the above information is true. My company and I authorize Commercial Kitchen Parts & Service to make such credit investigation as Commercial Kitchen Parts & Service sees fit. My company and I authorize all trade references, banks, and credit reporting agencies to disclose to Commercial Kitchen Parts & Service any and all information concerning the financial and credit history of my company and myself.

Authorized signature: _____ Date: _____
 Printed name: _____ Title: _____