GOLD STAR SEAFOOD

2300 W. 41ST STREET
CHICAGO, IL 60609
Phone (773) 376-8080
Fax (773) 376-9879

CREDIT APPLICATION

CORPORATE NAME

(dba) TRADE NAME

ADDRESS

CITY, STATE, ZIP

PHONE

FAX

BUSINESS FACTS :

☐ **CORPORATION** ☐ **PARTNERSHIP** ☐ **SOLE PROPIETOR**

IF CORPORATION: Date of Inc. _____In what State _____

Length of time in present location _____years.

Does Operator Own Premises ? YES ☐ NO ☑

MULTI – JURISDICTION
SALES TAX EXEMPTION CERTIFICATE

I certify that _____,_____
Name of Buyer Street Address

_____**Is engaged as a registered as**
City, State,

☐ **Wholesaler** ☐ **Retailer** ☐ **Manufacturer** ☐ **Lessor**

Is registered with the below listed states and cities within wich your firm would deliver purchases to us and that any such purchases are from wholesale, resale, ingredients or components of a new product to be resold, leased, or rented in the normal course of our business. We are in the business of Wholesaling , retailing, manufacturing, leasing, or renting.