

Welcome To Napoli Foods



Account Setup

www.napolifoodsinc.com

What's Inside...

- Account Set Up Form
- Connecticut Sales and Tax Certificate
- Accounting Contacts
- Online Ordering

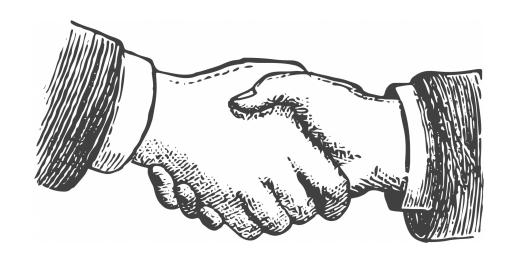
We appreciate the opportunity to be a valued resource and partner to you and your business. Napoli Foods is dedicated to providing the very best quality products and customer service to support your food service business.

To expedite the account set up process and get you ready to place your first order, please complete and sign the enclosed two(2) forms. Your Account Manager will walk you through the process to answer any questions and provide assistances filling out the forms to make this a quick and painless process.

Required Forms Enclosed:

- 1. Napoli Account Set Up
- 2. CT Sales & Tax ID Certificate.

Thank you for choosing Napoli Foods!



Napoli Foods – Credit/Account Setup Form

Account Manager _____



General Information								
Trade Name or DBA	e or DBA Corporate Name							
Contact Name	Title		Email					
Ship-To Address		City		State	Zip			
Phone #	Fax#							
State Sales & Use Tax #		Federal EIN						
Bookkeeper	Email		Phone #		Fax#			
Company Type: 🗆 Individual 🗆 Partnership 🗆 L	LC □ Corporation Date o	of Incorporation						
Name of Banking Institution Account #								
Business Type: Restaurant Pizzeria Distributor Retail Deli Foodservice Operations								
Hours of Operation:::	Receiving Hours::	Ke	ey Drop Available:					
	Owner	(s) Information						
Name	Date of Birth	Social Security	#	Driver's Lice	ense #			
Address		City		State	Zip			
Email		Home Phone #		Cell Phone	#			
Name	Date of Birth	Social Security	#	Driver's Lice	ense #			
Address		City		State	Zip			
Email		Home Phone #		Cell Phone	#			
Trade References								
Name	Address							
Account #	Terms			Phone #				
Name	Address							
Account #	Terms			Phone #				
Name	Address							
Account #	Terms			Phone #				
		& Conditions						
Applicant's Signature authorizes Napoli Foods, Inc. (NFI) to obtain principles and corporate credit standing and attests to the financial responsibility, ability, and willingness to pay our invoices in accordance with the following terms:								

- 1. I/We authorize all banking and trade references to release information to Napoli Foods, Inc. for its confidential use.
- 2. I/We agree to notify your Napoli Foods Account Manager immediately, in writing, of any change of ownership.
- 3. Product returns must be pre-authorized.
- 4. All product shortages must be notified within twenty-four (24) hours of delivery.
- 5. Returned checks are subject to a service charge.
- 6. Standard credit terms are seven (7) days from date of merchandise received.
- 7. All invoices are to be paid according to our stated terms, otherwise, they will be considered delinquent and may be placed for legal and/or collection with an outside agency.
- 8. If this account becomes delinquent, I acknowledge and agree to pay all collection costs, attorneys' fees, court expenses, and interest charges of 1.5% per month, which corresponds to an annual interest rate of 18%.

In consideration of Napoli Foods, Inc. (Seller) selling goods, wares, and merchandise upon credit or allowing additional time of payment on the present indebtedness, I hereby personally guarantee payment of any and all obligations incurred, and agree to personally pay the said obligations, in accordance with the terms between the parties, in the event of default.

Owner's Signature	Owner's Printed Name	Date
		
Owner's Signature	Owner's Printed Name	Date

Please Sign and Return to Napoli Foods Credit Department



STATE OF CONNECTICUT DEPARTMENT OF REVENUE SERVICES

SALES & USE TAX RESALE CERTIFICATE

Issued to (Seller)			Address	Address 10 KNOTTER DRIVE, CHESHIRE, CT 06410			
NAPOLI FOODS, INC.		10 KNOTTER					
I certify that	Name of Firm (B	suyer)	is en	is engaged as a registered			
	Street Address of	or P.O. Box No.		() Retaile () Manufa) Wholesaler) Retailer) Manufacturer) Lessor		
	City	State	Zip	() Other (specify)			
business	f wholesaling, r	etailing, manufact	uring, leasing (renting				
City or state		te Registration .D. No.	City or State	State Registration or I.D. No.			
City or state		te Registration .D. No.	City or State	State Registration or I.D. No.			
City or state		te Registration .D. No.	City or State	State Registration or I.D. No.			
make it su when state each order cancelled General de	bject to a sales law so provide which we may he by us in writing escription of pro	or use tax we will sor inform the sel ereafter give to yo or revoked by the oducts to be purchies of false statem	I pay the tax due directly ler for added tax billing u, unless otherwise secity or state. Tased from the seller ent that this certifica	te has been examined b	g authority all be part of alid until		
		ge and belief is a f	rue, correct and com	plete certificate.			
Authorized \$, Partner or Corporate C	Officer) 7	itle Date			

Account Specialists

Al Rios

Director of Credit & Collections Main - (860) 276-4026 arios@napolifoodsinc.com

Franco Castellano

Credit Department Supervisor Main - (860) 276-4011 credit@napolifoodsinc.com

Kamaldi Sosiah

A/R & Credit Specialist Main - (860) 276-4031 ksosiah@napolifoodsinc.com

HOURS: Monday-Friday: 8am-5pm

Online Ordering Avaliable



No Waiting!

Order At Your Convenience!

Available 24/7!



Ask Your Salesperson for Information.

Thank You For Choosing Napoli Foods, Your Foodservice Partner!



10 Knotter Drive Cheshire, CT 06410 (860) 276-4000