

# QUEENSTON MILE

## VINEYARD

### New Licensee Account Form

Restaurant Name; \_\_\_\_\_

AGCO Licensee Number; \_\_\_\_\_ Years In Business; \_\_\_\_\_

Delivery Address; \_\_\_\_\_

Special Delivery Instructions; \_\_\_\_\_

Business Hours; \_\_\_\_\_

Purchasing Contact; \_\_\_\_\_

Phone #; \_\_\_\_\_ Email Address; \_\_\_\_\_

### Pre-Paid Payment Information

VISA

MASTERCARD

AMERICAN EXPRESS

Credit Card Number; \_\_\_\_\_

Expiration Date; \_\_\_\_\_ / \_\_\_\_\_ Security Number (CVV); \_\_\_\_\_

CREDIT CARD PAYMENTS WILL BE PROCESSED AT THE TIME OF ORDERING AND AN EMAIL RECEIPT WILL BE ISSUED. IF YOU WOULD LIKE TO POST PAY WITH A CREDIT CARD YOU MUST REQUEST TERMS FOR THIS ACCOUNT.

Authorized Signature; \_\_\_\_\_ Date; \_\_\_\_\_

\* CREDIT CARD AUTHORIZATION REMAINS IN EFFECT UNTIL CANCELLED IN WRITING \*



TO REQUEST PAYMENT TERMS (POST-PAID) BY CHEQUE, EFT OR CREDIT CARD) CHECK THIS BOX AND A MEMBER OF OUR ACCOUNTING TEAM WILL BE IN TOUCH TO AUTHORIZE YOUR TERMS REQUEST.

A/P Email Address; \_\_\_\_\_

A/P Contact Name; \_\_\_\_\_ A/P Phone Number; \_\_\_\_\_