



Dear Purchasing Department,

Thank you so much for your interest in Parkway's products! We are really excited to have the opportunity to work with you and wanted to let you know that we are here to help incase you have any questions along the way.

To get you started, I wanted to let you know that we have an online catalog located at: <http://www.parkwayjars.com>. And our updated pricelist and brochure can be downloaded at: <https://store.parkwayjars.com/login.php?from=account.php%3Faction%3D>.

For your convenience, I have attached our standard credit application to this email. If you are interesting in applying for terms,

1. Please fill out the first page of this application in its entirety and complete the enclosed W-9 form and
2. Email it back to us along with one bank reference and three vendor references. For your convenience we have provided with a template you can fill out incase you do not have a standard one page credit information sheet.
3. If your company is located in either NJ or CA we will also need completed state tax exemption forms for your state, or we will be required to charge and collect your state's sales tax on your purchases. Please note after an order is invoiced as taxable, we have no choice but to collect tax for that invoice. We can of course update our records for future orders, but past orders cannot be revised. So if you are tax exempt please make sure to let us know right away. For your convenience, CA and NJ tax resale forms are attached.

Once we have received the above, we will reach out to your bank and your vendors and ask them to furnish us with information regarding your credit history. As soon as we receive all the information we need from them we will make a decision with regards to credit within 5 working days.

Thank you again for choosing Parkway! We look forward to speaking to you soon!

Kind Regards,

Kirstin Kelly  
Secretary Treasurer

[kirstin.kelly@parkwayjars.com](mailto:kirstin.kelly@parkwayjars.com)

Ned Rowan  
VP of Sales

[ned.rowan@parkwayjars.com](mailto:ned.rowan@parkwayjars.com)

Desiree Shelmet  
Accounts Recivables /  
Customer Service

[ar@parkwayjars.com](mailto:ar@parkwayjars.com)



## Credit Application – Limited Liability Corporation

Company Name: \_\_\_\_\_  
Physical Address: \_\_\_\_\_  
Billing Address (if different from above): \_\_\_\_\_  
Website: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Annual Sales Volume: \_\_\_\_\_ No of Years in Business ? \_\_\_\_\_  
Primary Lines of Business: \_\_\_\_\_ Uses for Packaging: \_\_\_\_\_  
Name and contact info of person we should be talking to about needs, usage and opportunities? \_\_\_\_\_  
How did you hear about Parkway? \_\_\_\_\_  
ACH is Parkway's preferred method of payment. Are you able to make payments via ACH? ( Yes ) or ( No )

Officer's Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Officer's Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

### Accounts Payable Contact?

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Please note, we no longer send invoices by US mail. Do you have a general email address for Invoices?

In addition to the email above, please send all invoices to this email: \_\_\_\_\_

**Is the AP contact above, responsible for and authorized to make payments to Parkway? ( Yes ) or ( No )**

If not, who is ? Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

***The following statement must be signed and dated by an Agent of the Partnership who is authorized to make payments to Parkway for the goods or services supplied:***

I agree to pay for all goods and services ordered by my corporation and delivered to our designated shipping addresses within the terms stated on Parkway's invoices. I understand and agree that unless otherwise stated by Parkway, in writing, that all products are shipped FOB factory, and payment is due 30 days from the shipping date or the invoice date, which ever is later. *I have read, understand and agree to Parkway's Terms and Conditions found on their website: [www.parkwayjars.com](http://www.parkwayjars.com). I understand that styrene jars; black, lined and metal caps; and custom and printed items are not returnable. I understand that Parkway Plastics is not responsible for any freight costs associated with any orders that I place. I understand that Parkway Plastics is not responsible for product compatibility. Not all materials are suitable for all applications. It is the buyers sole responsibility to test their products for compatibility with Parkway's products & services.* I further agree to pay any additional legal fees that may arise from collection efforts to collect on past due accounts.

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_



To Whom It May Concern:

Due to the tightening of regulations in the divulging of credit information, banks are now requiring written authorization from their depositors for release of any information in regards to their account.

When you return your completed credit application, please sign this authorization with your account number for your bank and return it also.

Thank you for your cooperation in this matter.

Date \_\_\_\_\_

I give my permission for the release of information about my  
acct# \_\_\_\_\_ as required on the attached bank credit reference letter.

Signed (X) \_\_\_\_\_



Bank's Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_

**To Whom It May Concern:**

Our customer, \_\_\_\_\_,  
located at \_\_\_\_\_  
is applying for credit with our company (Parkway Plastics, Inc, 561 Stelton Road,  
Piscataway, NJ 08854) and they have listed you as their bank reference. We would  
greatly appreciate it if you could please supply the following information to our credit  
department as soon as possible:

\*Regarding: Account# \_\_\_\_\_ \*  
Order Pending ~ Urgent Response Requested!!\*

**CHECKING ACCOUNT:**

Type of Account: \_\_\_\_\_  
Date Opened: \_\_\_\_\_  
Range of Average \_\_\_\_\_  
Available Daily Balance: \_\_\_\_\_  
Overdraft History: \_\_\_\_\_

**LOAN ACCOUNT:**

Type: \_\_\_\_\_  
Date Opened: \_\_\_\_\_  
High Credit: \_\_\_\_\_  
Currently Outstanding: \_\_\_\_\_

Very truly yours,

*Desiree Shelmet*

p: (732) 752-3636 x 104 / f: (800) 985-5370  
ar@parkwayjars.com



Vendor's Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_

**\*Attn: Accounts Payable Dept Order  
Pending ~ Urgent Response Requested!!\***

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Our customer, \_\_\_\_\_,  
located at \_\_\_\_\_  
is applying for credit with our company (Parkway Plastics, Inc, 561 Stelton Road,  
Piscataway, NJ 08854) and they have listed you as a credit reference. We would greatly  
appreciate it if you could please supply the following information to our credit  
department as soon as possible:

Sold from: \_\_\_\_\_ Largest amount owed: \$ \_\_\_\_\_

Sold To: \_\_\_\_\_ Now Owes: \$ \_\_\_\_\_

Date of Last Sale: \_\_\_\_\_ Amount Past Due: \_\_\_\_\_ Terms of Sale: \_\_\_\_\_

**How would you describe their USUAL manner of payment?** *(Please Check All that Apply)*

Discounts: \_\_\_\_\_ Prompt: \_\_\_\_\_ Prompt to 10 days late: \_\_\_\_\_

Slow: \_\_\_\_\_ Satisfactory: \_\_\_\_\_ Unsatisfactory: \_\_\_\_\_

Disputes: \_\_\_\_\_ Account Secured: \_\_\_\_\_ Collection efforts needed: \_\_\_\_\_

Extra Notes:

Very truly yours,

*Desiree Shelmet*

p: (732)752-3636 x 104 / f: (800) 985-5370  
ar@parkwayjars.com



Vendor's Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_

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