

Oshkosh Food Co-op



# OSHKOSH FOOD CO-OP

## PRODUCT VENDOR APPLICATION

BUSINESS CONTACT INFORMATION			
Company Name:			
Legal Business Name:			
Billing Contact (contact 2)			
Phone:	Fax:	E-mail:	
Sales Contact (contact)			
Phone:	Fax:	E-mail:	
Business address:			
City:		State:	ZIP Code:
Website:			
Date business commenced:			
Sole proprietorship:	Partnership:	Corporation:	Other:
BUSINESS TERMS AND PAYMENT			
TERMS	DISCOUNT	MIN ORDER	
SHIPPING	FOB Destination	FOB Origin	
Company Name Checks payable to: (must match name on W9 form)			
Remittance address			
City:		State:	ZIP Code:
RETURN/CREDIT POLICY			
Please state your credits/returns policy is if something comes in damaged or is of poor quality. How do you want us to go about getting credit from you? You can attach your policy as a separate document.			
LICENSING & CERTIFICATION REQUIREMENTS			
<b>We require a completed W9 from all vendors. Please complete and attach W9 form.</b>			
Please check any that apply to your business			
<input type="checkbox"/> Food Processor – attach copy of food processing license	<input type="checkbox"/> Distributor – attach copy of warehouse license		
<input type="checkbox"/> Cheese Maker – attach copy of cheesemaker license	<input type="checkbox"/> Meat – attach copy of license		
<input type="checkbox"/> Certified Organic – attach copy of certification			



## Local Vendors

Oshkosh Food Co-op defines local as within the state of Wisconsin.  
With this in mind, please answer the following two questions.

1. Are any of your products grown, raised, manufactured, or produced within the above defined local area? If so, please provide a list of which products apply and the address where you produce, grow, manufacture, or raise them.

2. What percentage of the ingredients in your product (by weight) were grown, raised, or produced within the above defined local region? Please provide as much detail about specific ingredients as possible.

AGREEMENT SIGNATURE

Signature of owner or officer of company required.

Signature

Print Name

Title

Date