



# TERMS AND CONDITIONS

C.I. LOS AROMAS FARMS S.A.S

Read sales terms carefully, before signing up.

## 1. Payment:

Term of payment: *Prepaid or 30 days from the invoice date and before "Due payment" date in the invoice, unless otherwise stated in writing. If payment is not made before "Due payment" date, future orders will be not released or shipped and 1.5% per month interest rate will be charged for any balance due.*

## 2. Checks and transactions:

Payments from USD and CANADA must be in checks. Payments from Europe, Asia and other countries should do transfer to our US HELM BANK account. CI LOS AROMAS FARMS *does not assume and is not responsible for transactional costs for international transfers. This cost shall be assumed by the customer.*

## 3. Inspections at arrival:

When orders are received at your facility, all products must be fully inspected. Devolutions or Quality Credits "if found" must be reported within 24 hours after products are received. If not reported to Aromas, credits will not be accepted.

## 4. Credit Claims:

When Credits, please ask the AROMAS Key Account Manager for the "Credit Declaration Form", fill it out with the required information and send it by E-Mail. Credit declaration Forms must be done, according to AROMAS "7-step procedure manual for credits", document always available for all current customers and as well sent to new customers.

- 4.1. Send picture "AROMAS CODES" on the box labels side. See: "7-step procedure manual for credits"
- 4.2. Send pictures of all stems in bad conditions. More than one pictures in good resolution is needed.
- 4.3. Send declaration of the specific number of bad stems and product. (In the Credit Declaration Form).  
(Every good stem pays our operation and employees' wage, please use all good stems you find to help us).

Then, your Key Account Manager will take the Credit Application Form to be proceeded. Then, we will send you back the answer or confirmation of the credit. Please ask for the "7-step procedure manual for credits". No deductions on payments will be accepted without the Credit Declaration Form completely filled out.

## 5. Fumigations:

Fumigations occur a minimum of times during the year, less than 0,036% of shipments are held by USDA. The main reason is avoiding plagues get into the country, but it does not specifically mean that this process will damage the product. In that sense, all products fumigated must be used by the customer. In case, some stems get affected by the fumigation, please follow instruction in the point # 4. C.I. LOS AROMAS FARMS will replace the product with a new one in the next shipment.

I certify that all the information and references provided in pages 2 and 3 are correct and I authorize C.I. LOS AROMAS FARMS S.A.S. to investigate any account information requested and contact all references and persons listed in page 2, also to investigate my personal credit history, including accessing credit bureau reports, for purposes of making credit decisions. It is understood that all information will be confidential. I also agree if collection proceedings are necessary in the event of a default payment including attorney's and court fees, that they shall be paid by the applicant. That if a corporation or partnership, the undersigned states and affirms that he/she is jointly and severally liable to all the terms, obligations and provisions in connection with C.I LOS AROMAS FARMS S.A.S.

# 1

Signature: \_\_\_\_\_

Date: MM / DD / YYYY

# CREDIT APPLICATION FORM

## C.I. LOS AROMAS FARMS S.A.S



Thank you for your interest in CI LOS AROMAS FARMS S.A.S For your convenience and to serve you more efficiently and completely, all information will be held in strict confidence and only for reference purposes within our credit department.

#2

Company Name: \_\_\_\_\_ DBA: \_\_\_\_\_  
 Tax ID: \_\_\_\_\_ Federal Tax ID: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_  
 Phone: \_\_\_\_\_ // \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_ Annual Imported boxes QB #: \_\_\_\_\_  
 Branches: \_\_\_\_\_ Date of business started: MM / DD / YYYY  
 Membership in a trade Association: \_\_\_\_\_  
 Company Structure: Corporation \_\_\_\_\_ LLC \_\_\_\_\_ Parnertship \_\_\_\_\_ Proprietorship \_\_\_\_\_ Other \_\_\_\_\_  
 Owned Building? Yes \_\_\_\_\_ No \_\_\_\_\_ Building Value \$ \_\_\_\_\_  
 Rented Building? Yes \_\_\_\_\_ No \_\_\_\_\_ From whom \_\_\_\_\_ Phone Number: \_\_\_\_\_

### RESPONSIBLE PARTIES

Name	Home Address	SS Number	Home Phone Number
_____	_____	_____	(____) _____
_____	_____	_____	(____) _____
_____	_____	_____	(____) _____
_____	_____	_____	(____) _____

#3

Have any of the person names above ever filed for bankruptcy: No \_\_\_\_\_. Yes \_\_\_\_\_, Who: \_\_\_\_\_  
 Have your company ever filed for bankruptcy?: No \_\_\_\_\_. Yes \_\_\_\_\_, What year: \_\_\_\_\_

#4

Bank Name: \_\_\_\_\_ Account #: \_\_\_\_\_  
 Authorized Signature at the Bank: \_\_\_\_\_ Phone & Ext: \_\_\_\_\_  
 Accounts Payable Contact: \_\_\_\_\_ Phone & Ext: \_\_\_\_\_

**Credit Extensión Required\*** \$:  

\*Please fill out "Individual Personal Guarantee" if credit extension required is over USD 3.000. See page # 4.

### COLOMBIAN TRADE REFERENCES (Mandatory)

#5

Company 1: \_\_\_\_\_ Phone & Ext: # \_\_\_\_\_  
 Contact: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Company 2: \_\_\_\_\_ Phone & Ext: # \_\_\_\_\_  
 Contact: \_\_\_\_\_ E-mail: \_\_\_\_\_

### PERSONAL REFERENCES (Mandatory)

#6

Contact 1: \_\_\_\_\_ Phone & Ext: # \_\_\_\_\_  
 Cellphone: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Contact 2: \_\_\_\_\_ Phone & Ext: # \_\_\_\_\_  
 Cellphone: \_\_\_\_\_ E-mail: \_\_\_\_\_

### FAMILY REFERENCES (Mandatory)

#7

Name 1: \_\_\_\_\_ Phone & Ext: # \_\_\_\_\_  
 Name 2: \_\_\_\_\_ Phone & Ext: # \_\_\_\_\_

### CARGO AGENCY (Mandatory)

#8

Name: \_\_\_\_\_ Phone & Ext: # \_\_\_\_\_  
 Contact: \_\_\_\_\_ Email: \_\_\_\_\_

#9

Signature: \_\_\_\_\_ Date: MM / DD / YYYY



# BANKING REFERENCE

## COMPANY INFORMATION

*FIELD TO BE FILLED OUT BY THE COMPANY*

Company Name: \_\_\_\_\_ DBA: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_  
 Phone: \_\_\_\_\_ // \_\_\_\_\_ Fax: \_\_\_\_\_

## BANK ACCOUNT INFORMATION

Bank Name: \_\_\_\_\_ Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_  
 Checking Account #: \_\_\_\_\_ Saving Account#: \_\_\_\_\_  
 Bank Officer Name: \_\_\_\_\_ Phone & Ext: \_\_\_\_\_  
 Email: \_\_\_\_\_ Cellphone #: \_\_\_\_\_

I hereby authorize you to furnish C.I. LOS AROMAS FARMS S.A.S with the following information about my account. Thank you for your prompt attention in this matter.

Signature: \_\_\_\_\_ Date: MM / DD / YYYY

*FIELD TO BE FILLED OUT BY THE BANK*

Dear Bank officer, the above customer has given us your name as a bank reference. Please fill out the following form and mail it to us as soon as possible. [ventas1@cilosaromas.com](mailto:ventas1@cilosaromas.com); [ventas2@cilosaromas.com](mailto:ventas2@cilosaromas.com); [ventas3@cilosaromas.com](mailto:ventas3@cilosaromas.com); [ventas4@cilosaromas.com](mailto:ventas4@cilosaromas.com)

1. When was the account opened?: \_\_\_\_\_ MM / DD / YYYY

2. Average balance (if Applicable)?: \_\_\_\_\_

3. Number of NSF Checks (Last 12 months)?: \_\_\_\_\_

4. Credit of Loans with this company?: \_\_\_\_\_

5. Account Activity experience?: Good  Fair  Poor

6. Other Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

We appreciate all your help and cooperation.  
Sincerely yours,

# 14 Date (by Bank Officer): \_\_\_\_\_ MM / DD / YYYY

**Alejandro Echeverri Mesa**  
General Manager

## INDIVIDUAL PERSONAL GUARANTEE

Only fill this out If you are requiring more than USD 3.000 credit limit, please fill this out.

In consideration for the credit extended, the undersigned contracts and guarantees to the faithful payment, when due of all accounts of the company seeking credit for 5 years from the date of this application. The undersigned guarantor expressly waives all notice of acceptance of this guarantee, notice of extension of credit, presentment of demand for payment and any notice of default by the company seeking credit and all other notices the guarantor might be entitled to.

Revocation of the guarantee shall be in writing and delivered by certified mail.

I, \_\_\_\_\_, residing in  
(address) \_\_\_\_\_  
(city) \_\_\_\_\_ (state) \_\_\_\_\_ (zip), \_\_\_\_\_,  
read and understood above conditions and I personally guarantee to send the payment at: C.I LOS AROMAS FARMS S.A.S, of any obligations of the company: \_\_\_\_\_ and I hereby agree to bind myself to pay you on demand any sum which may become due to you by the company whenever the company shall fail to pay the same.

**Signature:** \_\_\_\_\_ **Date:** MM / DD / YYYY

**Witness Name:** \_\_\_\_\_

**Witness Phone:** \_\_\_\_\_