

NEW ACCOUNT FORM

Return by fax to 800-998-1904:

PLEASE INCLUDE A COPY OF YOUR RESALE TAX EXEMPT ID.

ompany Name:					
Address:					
City, St, Zip:					
County:					
Telephone:	Fax:				
Email:	Contact:				
CREDIT CARD	PAYMENT AUTHORIZATION				
	, do hereby authorize you to charge the Credit Card account purchases of product and/or services that will be made from phone ase orders.				
VisaMaste	rcardAmerican ExpressDiscover				
Credit Card#	Exp Date				
Name on Card_	Security Code				
Billing Address	of Cardholder:				
Street A	ddress				
City,S	ate,Zip				
Authorized Purc	nasers: Authorized Ship To's:				
	contained herein are correct to the best of my knowledge. I agree itions as published by Rennoc and agree to pay all invoices within terms.				
 Date	Signature of Cardholder Title				

^{*}Please attach a copy of your resale tax certificate*
All new accounts subject to sales department approval

Return completed form with Tax Exempt Certificate:

Copy of sales tax ID certificate is required with credit application.

By fax to 800-998-1904

CREI ** PLEASE ATTACH MOST RECEN	OIT APPLICATION T FINANCIAL STATEMENT	AND LIST OF OUTL	Date: ETS AND/OR FRANCHI	SE LOCATIO	NS TO THI	S APPLICATION**
Company Name:		DBA				
			State: Zip:			
Telephone: () Type of Ownership: Sole Owner 1	Fax: ()Partnership 🛮 Corporation, State	se of incorporation	ales Tax exemption Nu	ımber (<u>Copy Re</u>	quired)	
Name	Ownership Home A	RINCIPALS OF COM Address	PANY:	Home Telep	hone	Soc. Sec Number
				1		
DESIRED CREDIT LINE \$						
Accounts Payable Contact: Any Prior Bankruptcies:						
Financial Statement: Audited Yes 🛭 No				a vendor compl	iance manua	12 Yes 🛛 🕅 No 🕅
This is a second of the second	Z Z GAMMANOM TOO Z Z TAO	BANK REFERENCE		a venuer comp		165 2 2 1 10 2
1) Bank Name		Telephone: ()	Fax: (()	
Street:	City:			State:	Zip	:
Contact:						
2) Bank Name		Telephone: ()	Fax: ()	
Street:		City:		_State:	Zip	:
Contact:						
TRADE REF	FERENCES (Comparable Appar	rel Open accounts only,	please give account number	rs and complete	addresses)	
1) Name:	Acct.	# (essential)		E-Mail		
Address:		City:	Sta	ite:	Zip:	
Contact	Telephone: ()	F	ax: ()		
2) Name:	Acct.	# (essential)		E-Mail		
Address:		City:	Sta	ite:	Zip:	
Contact	Telephone: ()	F	ax: ()		
3) Name:	Acct. #	# (essential)		E-Mail		
Address:		City:	Sta	ite:	Zip:	
Contact	Telephone: ()	Fa	ax: ()		
We hereby certify that all statements in this by the due date, at the address indicated on reasonable cost of collection, whether or no DeLONG in its dealer price list. In addition following assumption of responsibility and payable to DeLONG, by the applicant liste	the invoice. If not paid as agreed, of suit is filed. I understand that accept to the financial statements and as guaranty agreements. I/We assume	we promise to pay a final reptance of orders placed an inducement to sell me e personal responsibility	nce charge of 1½ % per mon with DeLONG are subject to the applicant, the control of the applicant, the control of the applicant of the applica	th for delayed page of credit approvalue of the credit approvalue.	nyment, and t l and terms a ers. officers	to reimburse creditor for and conditions set forth by or partners may sign the
The signature below authorizes and gives parties and gives parties authorization includes the release of conferedit.						
DateSignat	ure		Tit	le		

IN ADDITION TO THE FINANCIAL STATEMENTS AND AS AN INDUCEMENT TO SELL MERCHANDISE TO THE APPLICANT, THE PRINCIPAL OWNERS, OFFICERS OR PARTNERS MAY SIGN THE FOLLOWING ASSUMPTION OF RESPONSIBILITY AND GUARANTY AGREEMENTS. I/WE ASSUME PERSONAL RESPONSIBILITY FOR AND HEREBY CONTINUING GUARANTEE FULL PAYMENT OF ALL PAYMENTS AND OTHER SUMS DUE AND PAYABLE TO DELONG, BY THE APPLICANT LISTED, INCLUDING SERVICE CHARGES AND FEES THAT MAY ACCRUE COLLECTING THE ACCOUNT. RESTRICTIONS ON SALES/PURCHASES/ASSIGNMENT Customer will not (a) sell, transfer or assign its right as an authorized DELONG dealer without the express written consent of DELONG; (b) sell or otherwise transfer or transship DELONG goods to another retailer, distributor, or broker; or (c) purchase DELONG products from any source other than DELONG. Additionally, Customer may only resell DELONG products (apparel, footwear, and accessories) through the outlet locations(s) specified in the Credit Application or subsequently approved in writing by DELONG. Any other form of resale of DELONG products other than as specified above shall be prohibited without the prior written approval of DELONG. Such prohibitions shall include, but not be limited to, the following: Customer may not resell DELONG products (visible or encapsulated) through the mail, by catalog, by phone or through the use of any computer network, the Internet, the World Wide Web, or any other electronic means (regardless of the medium). Such right, if granted, is limited to sales and deliveries within the United States. Further, Customer may not advertise DELONG products over the Internet unless such advertisement directs purchase and fulfillment of DELONG products specifically at the location(s) approved in the Credit Application or subsequently approved in writing by DELONG. Violation of the aforementioned conditions may result in the immediate termination of Customer's account and cancellation of existing orders. Further, if Customer opens or acquires additional retail outlet(s), Customer must notify and receive written approval from their sales representative before any additional or new outlet or franchise can be opened. DELONG does not guarantee DELONG approval of any other outlet or franchise location. We hereby certify that all statements in this application to DeLONG are true and complete and made for the purpose of obtaining credit. We agree that all accounts are due and payable by the due date, at the address indicated on the invoice. If not paid as agreed, we promise to pay a finance charge of 1½ % per month for delayed payment, and to reimburse creditor for reasonable cost of collection, whether or not suit is filed. I understand that acceptance of orders placed with DeLONG are subject to credit approval and terms and conditions set forth by DeLONG in its dealer price list. The signature below authorizes and gives permission to DeLONG to run a full investigation of your credit history including but not limited to obtaining a consumer credit report. This authorization includes the release of credit information by our banks, trade references, and consumer credit necessary to assist DeLONG or their agents in establishing a line of credit. All ordered merchandise will be packed and routed following DeLONG standards. Please provide the information below, if your company has specific needs. Routing Contact)_____Fax: (Telephone: (Compliance Contact

Fax: (

Telephone: (