



4900 S. 9th Street - Kalamazoo, MI 49009-9552

Customer Service: Ph: (800) 253-9885 Fax: (800) 234-9150

Credit/Accounting Department: Ph: (800) 234-4909 Fax: (800) 305-3513

Website: www.edwardsgarment.com

ACCOUNT PROFILE / CREDIT APPLICATION

Form with fields for Date, Taken By, Sold To, Legal Name, Address, City, State, Zip, Ship To, Telephone, Fax, and an internal use only box for CUST. #, D&B, SIC #, SALES REP, CR RESP, CR LIMIT, DISCOUNT, SALES TAX, COUNTY, E-Mail, and ASI/PPAI#.

Table with columns 'Name of Principal(s)' and 'Name of Contact(s)'. Rows include 'Authorized Buyer' and 'General Manager'.

If Applicant, Affiliates or Principals have ever done Business with Edwards, List Name & Address:

Applicant Is:

Corp./LLC + Date Inc. Partnership + # Years: Sole Proprietor + # of Years:

Type of Business by %: Manufacturer, Uniform Wholesale/Retail, Laundry, Embroidery/Screenprinting, Promotional Products

Requested Credit Limit: Anticipated Annual Purchases:

Are You Sales Tax Exempt?: No Yes State: (If yes, completed exemption form must be on file)

Edwards Shipping Policy:

Orders are normally shipped ground by carriers selected at the discretion of Edwards. Special shipping instructions must be provided to customer service with your order...

Applicant Shipping Instructions:

Do you require compliance with a routing guide?: No Yes (If yes, please attach the proper routing instructions.)

How do you wish to receive your invoices: (Please check One)

E-Mail: Fax:

How did you hear about us?

Advertisement Press Release Trade Show Established Customer Web Site Other

Trade Shows

ASI ISS NAUMD World Expo PPAI OTHER



Account Profile/Credit Application (continued)

Bank Reference:

Name: _____ Contact: _____
City: _____ State: _____ Phone: _____
Checking Acct.#: _____ Savings Acct.#: _____
Loan(s) Acct. #: _____

Trade References:

- 1. Supplier's Name: _____ City: _____ State: _____
Phone: _____ Fax: _____ Acct. #: _____
- 2. Supplier's Name: _____ City: _____ State: _____
Phone: _____ Fax: _____ Acct. #: _____
- 3. Supplier's Name: _____ City: _____ State: _____
Phone: _____ Fax: _____ Acct. #: _____
- 4. Supplier's Name: _____ City: _____ State: _____
Phone: _____ Fax: _____ Acct. #: _____

Terms and Conditions:

I have completed this application to obtain credit, and certify that all statements contained herein are true and correct. I am authorized by the credit applicant to execute this document on its behalf. Applicant agrees that credit inquiries may be made, and authorizes the release of such information to Edwards. Applicant agrees that any credit granted shall be paid promptly in accordance with Edwards (Net 30 Day) terms, pricing and policies (Edwards policies are included in our published price list). Applicant also agrees in the event any terms or pricing on a purchase order executed by Applicant are inconsistent with Edwards' terms, pricing and policies; Edwards terms, pricing and policies shall take precedence. Edwards must consent to any modifications in writing. Applicant must notify Edwards in writing of any change in legal structure and/or ownership. In the event other entities or individuals order merchandise using the Applicant's account without Edwards receiving proper written notification, it is agreed that both the Applicant and/or such other entities or individuals receiving the merchandise shall be obligated for all amounts due.

Applicant agrees that credit may be cancelled/revoked at any time without notice, and in the event of default, to pay collection charges, actual attorney fees, and court costs. Edwards may change credit limits or other credit terms at any time, in its sole discretion. Edwards also reserves the right to suspend performance on any purchase order until payment is received for any unpaid past due balance. Applicant agrees to examine merchandise immediately upon receipt, and to advise Edwards of any disputed transactions within 10 days of receipt. Failure to notify Edwards of any dispute with respect to defective goods shall constitute a waiver of all such disputes. Service charges up to 1½% per month, or the maximum amount allowed by law, to any balance not paid in accordance with Edwards' terms and conditions. These terms and conditions are governed by the laws of the State of Michigan, and if suit is necessary to recover payment, state and federal courts whose district include Kalamazoo County, Michigan, have jurisdiction and proper venue.

Authorized Signature: _____ Date: _____

Title: _____

**COMMONWEALTH OF VIRGINIA
SALES AND USE TAX CERTIFICATE OF EXEMPTION**

**(For use by a Virginia dealer who purchases tangible personal property for resale,
or for lease or rental, or who purchases materials or containers
to package tangible personal property for sale)**

To: Edwards Garment Company _____ Date _____ , _____
(Name of supplier)

4900 S 9th Street _____ Kalamazoo _____ MI _____ 49009 _____
(Number and street or rural route) (City, town, or post office) (State) (ZIP Code)

The Virginia Retail Sales and Use Tax Act provides that the Virginia Sales and use tax shall not apply to tangible personal property purchased for resale; that such tax shall not apply to tangible personal property purchased for future use by a person for taxable lease or rental as an established business or part of an established business, or incidental or germane to such business, including a simultaneous purchase and taxable leaseback. The Act provides also that such tax shall not apply to packaging materials such as containers, labels, sacks, cans, boxes, drums or bags if the materials are marketed with a product being sold and become the property of the purchaser.

This Certificate of Exemption may not be used by a using or consuming construction contractor as defined in the Regulations.

The undersigned dealer hereby certifies that all tangible personal property purchased from the above named supplier on and after this date will be purchased for the purpose indicated below, unless otherwise specified on each order, and that this Certificate shall remain in effect until revoked in writing by the Department of Taxation. (Check proper box below.)

- 1. Tangible personal property for RESALE only.
- 2. Tangible personal property for future use by a person for taxable LEASE OR RENTAL as an established business, or part of an established business, or incidental or germane to such business, or a simultaneous purchase and taxable leaseback.
- 3. Packaging materials such as containers, labels, sacks, cans, boxes, drums or bags that are marketed with a product being sold and become the property of the purchaser.

Name of Dealer _____ **Certificate of Registration No.** _____

Trading as _____

Address _____
(Number and street or rural route) (City, town, or post office) (State) (ZIP Code)

Kind of business engaged in by dealer _____

I certify that I am authorized to sign this Certificate of Exemption and that, to the best of my knowledge and belief, it is true and correct, made in good faith, pursuant to the Virginia Retail Sales and Use Tax Act.

By _____
(Signature) (Title)

(If the dealer is a corporation, an officer of the corporation or other person authorized to sign on behalf of the corporation must sign; if a partnership, one partner must sign; if an unincorporated association, a member must sign; if a sole proprietorship, the proprietor must sign.)

Information for supplier — A supplier is required to have on file only one Certificate of Exemption properly executed by the dealer who buys tax exempt tangible personal property for the purpose indicated hereon.