

DISTRIBUTOR PROFILE

Date: _____

Company Name: (dba) _____

Legal Name: (if different) _____

Address: _____ Ste: _____

City, State, Zip: _____

Ship To: (if different) _____

Address: _____ Ste: _____

City, State, Zip: _____

Telephone: _____ Email: _____

Edwards Webstore Admin Email: _____

Name of Owner/Principal(s)

Name of Contact(s)

1. _____ Authorized Buyer: _____

2. _____ Authorized Buyer: _____

3. _____ General Manager: _____

Associations

Please provide the number or name of associations with whom you are a member (provide all that apply):

ASI: _____ PPAI: _____ SAGE: _____

PPPC: _____ NACM: _____ Buying Group: _____

Type of Business

Legal Structure: _____ Year Established: _____

Primary Business Operation: _____

Industries You Sell To (select all that apply):

- | | | | |
|-----------------|-----------------|----------------|--------------|
| Assisted Living | Automotive | Casinos/Gaming | Food Service |
| Healthcare | Hotels/Resorts | Restaurants | Retail |
| Security | Stadiums/Arenas | Theme Parks | Transit |

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, or standard shipping instructions may be provided below, or otherwise in writing to Edwards. If you require compliance with a routing guide, provide the routing guide before ordering. Applicable freight charges will be included on the invoice or billed separately to your account as determined by the shipping method.

Email To Receive Invoices: _____

CREDIT AGREEMENT

Trade References:

1. Supplier's Name: _____ City: _____ State: _____
 Phone: _____ Email: _____ Acct.#: _____

2. Supplier's Name: _____ City: _____ State: _____
 Phone: _____ Email: _____ Acct.#: _____

3. Supplier's Name: _____ City: _____ State: _____
 Phone: _____ Email: _____ 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 not display Edwards products for sale on any third-party websites or marketplaces without prior written authorization from Edwards.** 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 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 the 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 1¹/₂% 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:** _____

Company Name: _____ **Title:** _____

I agree to comply with all [Edwards Policies](#) and [Terms of Use](#).