



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

Customer Service: Ph: (800) 253-9885

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

Website: www.edwardsgarment.com

DISTRIBUTOR PROFILE/CREDIT AGREEMENT

Date: _____

Company Name: (dba) _____

Legal Name: (if different) _____

Address: _____ Ste: _____

City, State, Zip: _____

Ship To: (if different) _____

Address: _____ Ste: _____ Email: _____

City, State, Zip: _____

Telephone: _____ Fax: _____

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: _____

Channels

Please indicate what channels your business sells through (select all that apply):

Direct Sales Rep Wholesale Retail Outlets Rental
Website (if so, please supply url) _____

3rd Party Marketplaces (select all that apply):

Amazon Walmart Google Ebay Sears Other: _____

Requested Terms (please select): _____

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: _____

How Did You Hear About Us (please select): _____

Do you have any additional locations you would like to establish an account for? If so, please attach information for each location (company name, contact name, address, phone, fax, email).



DISTRIBUTOR PROFILE/CREDIT AGREEMENT (continued)

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.#:** _____

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 1^{1/2}% 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](#).

**Blanket Exemption Certificate
for purchases by registered wholesalers for
resale or further processing under the Louisiana General Sales Tax Act**

Date _____

This certifies that the following types of materials, goods, merchandise, and services purchased by the undersigned from _____

Edwards Garment Company are to be used for resale or further processing for resale as tangible personal property by the undersigned registered wholesale dealer and are, therefore, exempt from the advance tax provisions of Louisiana Revised Statute 47:306B.

Registration certificate number (valid only if it includes the letter "W") Apparel
Type of property to be resold

The undersigned purchaser further certifies that the location of the business shown below has been assigned a wholesale sales tax registration number by the Department of Revenue, enabling him to make purchases of property for resale or further processing without payment to vendors of the advance sales tax, and that his current account number is indicated above. The purchaser assumes full liability if the sale is later held subject to tax, even though the seller has received this completed certificate.

Name of purchaser _____

Address City, State, ZIP

Signature of purchaser's authorized agent _____

Any purchaser who fraudulently signs this certificate without intent to use the property or services purchased as stated above will be subject to all penalties provided for by Louisiana statutes. This certificate will remain in effect until withdrawn by the purchaser, or the purchaser's sales tax account is closed, or the purchaser's ability to make tax-free purchases is amended or revoked by the Department of Revenue.