

For Office Use Only

Account # _____

Date Est. _____

RICHLIN FABRICS ACCOUNT APPLICATION

414 East 14th Avenue
North Kansas City, MO. 64116
Web www.RichlinFabrics.com

816-842-6829 * Fax 816-842-8571
Toll Free 800-742-4546
Email Info@RichlinFabrics.com

Section A. General Information

| <u>Bill To</u> | <u>Ship To</u> | <u>Contact</u> |
|--------------------------------|------------------------------------|-------------------|
| Company Name | Company Name | Buyers Name |
| Mailing Address | Street Address | Buyers Email |
| Suite, Floor, Department, Etc. | Suite, Floor, Dock, Building, Etc. | Owners Name |
| City, State & Zip | City, State & Zip | Owners Email |
| Office Phone Number | Ship To Phone Number | Office Fax Number |

Section B. Business Facts

| <u>Business Info</u> | <u>Company Info</u> | <u>Bank Info</u> |
|---|--|-------------------|
| Type of Business (Retail, Manf. Non-Profit) | Registered as (LLC, Corp. Sole Proprietor) | Name of Bank |
| Products or Services Rendered | Date Opened or Acquired by Owners | City, State & Zip |
| State Sales Tax Number | State of Registration | Contact Name |
| Company Web Site | Federal EIN | Phone Number |

Section C. Type Of Account Requested

| <u>___ Credit Terms</u> | <u>___ Credit Card</u> |
|--|---|
| Richlin Fabrics Credit Terms Are Net 30 Days, With Approved Credit | Type of Card (MasterCard, Visa, Discover) |
| Are Purchase Order's Required? ___ Yes ___ No | Name on the Card |
| Please Attach A List of Names Other Than Those Listed On This Application, Which Are Authorized To Place Orders On Your Account. | Credit Card Number |
| Sect D is required to establish credit | Verification Code |
| | Expiration Date |
| | SIGNATURE |
| | Skip Section D, Go to Section E |

Please Complete The Other Side Of This Application
Section D. Trade References

| | |
|---|---|
| 1) <hr/> <p align="center">Name of Supplier</p> <hr/> <p align="center">Address</p> <hr/> <p align="center">City, State Zip /</p> <hr/> <p align="center">Phone Number / Fax Number</p> <hr/> <p align="center">Your Account Number</p> | 2) <hr/> <p align="center">Name of Supplier</p> <hr/> <p align="center">Address</p> <hr/> <p align="center">City, State Zip /</p> <hr/> <p align="center">Phone Number / Fax Number</p> <hr/> <p align="center">Your Account Number</p> |
| 3) <hr/> <p align="center">Name of Supplier</p> <hr/> <p align="center">Address</p> <hr/> <p align="center">City, State Zip /</p> <hr/> <p align="center">Phone Number / Fax Number</p> <hr/> <p align="center">Your Account Number</p> | 4) <hr/> <p align="center">Name of Supplier</p> <hr/> <p align="center">Address</p> <hr/> <p align="center">City, State Zip /</p> <hr/> <p align="center">Phone Number / Fax Number</p> <hr/> <p align="center">Your Account Number</p> |

Section E. Shipping

| |
|---|
| <p align="center">Shipping Instructions (please check or fill out as appropriate)</p> <p><input type="checkbox"/> Ship All of our orders by the cheapest service, at your discretion, prepaid and add the charges to my invoice.</p> <p><input type="checkbox"/> Fedex Collect on my Account # _____</p> <p><input type="checkbox"/> U.P.S. Collect on my Account # _____</p> <p><input type="checkbox"/> U.S.P.S. Priority Mail prepaid and add the charges to my invoice, (Richlin Fabrics does not use Parcel Post).</p> <p>Any of our orders that weigh over _____ pounds, ship freight collect by: _____</p> <p><input type="checkbox"/> Our company provides routing instructions on the PO's or in a published routing guide, copy attached.</p> <p><input type="checkbox"/> Contact our freight broker: _____ at phone: _____</p> <p><input type="checkbox"/> Other, Specify: _____</p> <hr/> <p align="center">Our Ship To Address Is A: <input type="checkbox"/> Residential Location, <input type="checkbox"/> Commercial Location</p> |
|---|

Section F. Read and Sign

| | |
|---|-------|
| <p>The information contained herein is submitted by the undersigned for the purpose of obtaining an account and/or credit. The undersigned expressly agrees to make payment in full to Richlin Fabrics, Inc. for all purchases, in accordance with Richlin Fabrics, Inc. invoice(s). The undersigned agrees to pay a reasonable attorney's fee and all other costs and expenses incurred by Richlin Fabrics, Inc. in the collection of any obligation of the undersigned pursuant hereto. Applicant likewise agrees that if suit is necessary to enforce collection of any past due amounts, that said suit may be filed in Clay County, Missouri, and any defense of improper venue for collection of any amounts shall be Clay County, Missouri.</p> <p>For credit card purchases and payments, by signing below, you agree to pay total amount of charges according to card issuer agreement. This application for an account, once accepted by Richlin Fabrics, Inc., shall become part of every invoice and every credit card transaction to applicant and is incorporated herein.</p> | |
| | |
| Authorized Signature | Title |
| Print Name | Date |

A Signature Is Mandatory Prior To Establishing An Account

