



The Finest in Aquatic Livestock and Companion Animals



Confidential Business Application

195 Prairie Lake Road, East Dundee IL 60118

Phone: (847) 586-5800 Fax: (847) 586-5865

Business Information:

Business Name: _____

Owner Name: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Main Phone: _____ Fax: _____

Email: _____ Web Site: _____

Contact Name at Store: _____

Type of Business: Sole Proprietor Corporation Partnership Maintenance

Are purchase orders required? Yes No

Years in Business: _____ Years at present location: _____

Purchases intended for resale. Yes No

Sales Tax I.D. (also referred to as a Reseller's Tax I.D.#) _____

Please provide a copy of your Tax Exemption Certificate. We are wholesale to the trade only and unable to establish any business relationship until we have a Tax Exemption Certificate or Resale Certificate is provided to us. Expired certificates without renewal receipt will be rejected.

Federal Tax ID# _____ - _____ **Business Lic.#** _____

Please list three business related references:

Name	Phone	Yrs
_____	_____	_____
_____	_____	_____
_____	_____	_____

Bank Name: _____ **Phone:** _____

Address: _____

City _____ **ST** _____ **ZIP** _____

Business Checking Account # _____

Office use only:

Customer # _____ Date entered ____/____/____

Account Manager: _____ Direct Dial: _____ Ext: _____

Sort key _____ Ship via _____ Co. Code _____

Terms: C.O.D. Cash Company Check Credit Card Other: _____

Authorized By: _____ Date: _____

All information must be completed.

Please fill in all required information neatly to avoid any delay in processing your application.



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Terms and Conditions Agreement

It is agreed that purchases made on this account will be paid within terms stated on this application. N.S.F. Checks will carry a \$15 re-deposit fee, and if returned a second time, a \$35 service charge. I hereby authorize apet, Inc. to contact and verify the references herein listed, or statements or other data obtained from me or any other person pertaining to credit and financial responsibility.

Applicant certifies that all information contained in this application is true and correct. Applicant also represents and agrees that all merchandise purchased is for business, commercial or resale purposes only. Product is delivered with a live arrival guarantee. No other warranties or guarantees are express or implied. Any apet authorized credits issued will be applied to the next order. apet reserves the right to change customer terms without notice.

Signed (Owner/Officer): _____

Printed Full Name: _____

Home address: _____

City / St / Zip: _____ / _____ / _____

Email address: _____

Phone: _____ Cell phone: _____

Date: ____/____/____

Signed (Partner) (If applicable): _____

Print Full Name: _____

Home address: _____

City / St / Zip: _____ / _____ / _____

Email address: _____

Phone: _____ Cell phone: _____

Date: ____/____/____

Thank you!

All information must be completed.

Please fill in all required information neatly to avoid any delay in processing your application.



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CREDIT CARD AUTHORIZATION

Store Name: _____

Store Address: _____

Name as it Appears on Card: _____

Credit Card#: _____

Card type (circle): VISA M/C AMEX DISCOVER

Is this a debit credit card? (circle) Y N

Expiration date: _____

CVV/CVC code: _____ (3 digit code; can be phoned in for security)

Billing Address: _____

(Where you receive bill; please include street address, city, state, and zip)

I give apet Inc. authorization to charge this credit card for purchases or for past due balances for the account above. By signing this form I am verifying the card belongs to me, or I am an authorized signer on the account. If receipt of an order occurs without an apet driver present, no product credits will be issued. Product is delivered with a live arrival guarantee; no other warranties or guarantees are express or implied. Once an airline accepts product for shipment, all product claims should be filed by the customer with the airline. Any apet authorized credits will be applied to the next order.

Sign: _____ Date: _____
(authorized signature)

Print: _____

**All information must be completed.
Please fill in all required information neatly to avoid any delay in processing your application.**