



95 MONARCH ST., LITTLESTOWN, PA 17340

DEALERSHIP APPLICATION

BUSINESS NAME & ADDRESS

SHIPPING ADDRESS

TEL # _____

FAX # _____

ATTACH TAX RESALE CERTIFICATE

CORPORATION, PARTNERSHIP, SOLE PROPRIETORSHIP, SUB S? (CIRCLE ONE)

YEAR BUSINESS STARTED _____ FEDERAL TAX ID

LIST OFFICERS IF CORPORATION – INDICATE ALL STOCKHOLDERS, PERCENT OF OWNERSHIP AND SOCIAL SECURITY NUMBERS.

SS# _____

SS# _____

SS# _____

SALES MGR. _____ PURCH.
MGR _____

LIST PREVIOUS 5 YEARS EMPLOYMENT OF ALL ABOVE INDIVIDUALS, SHOWING PLACE OF EMPLOYMENT AND POSITION HELD.

BANK(S) _____

LIST SUPPLIERS WITH MAILING ADDRESSES, PHONE & FAX NUMBERS

ACCESSORIES _____

ACCESSORIES _____

ACCESSORIES _____

ACCESSORIES _____

CUSTOMER MIX %: [] HOSP [] VET [] CHIRO [] MAIL ORDER

SALESPEOPLE # _____ EXHIBIT AT LOCAL CONVENTIONS

PLEASE APPROXIMATE YOUR CURRENT PURCHASE HABITS BELOW:

AVG/MONTH	SOURCE	CATALOG #
_____ ID PRINTERS	_____	_____
_____ APRONS	_____	_____
_____ EYEWEAR	_____	_____

PROVIDE DETAILS OF ANY CURRENT OR PREVIOUS BANKRUPTCIES INVOLVING ANY PRINCIPALS OR YOUR COMPANY ON BACK. IF NONE – WRITE NONE.

I [WE] AGREE TO PAY ANY COLLECTION COSTS INCURRED TO COLLECT THE ACCOUNT BALANCE INCLUDING REASONABLE COLLECTION FEES.

YOU ARE AUTHORIZED TO INVESTIGATE THE CREDIT REFERENCES LISTED.

AUTHORIZED SIGNATURE _____

TITLE _____ DATE _____

PERSONAL GUARANTEE

IN CONSIDERATION OF CREDIT BEING EXTENDED BY BAR-RAY PRODUCTS TO THE ABOVE NAMED APPLICANT FOR MERCHANDISE TO BE PURCHASED WHETHER APPLICANT BE AN INDIVIDUAL OR INDIVIDUALS, A PROPRIETORSHIP, A PARTNERSHIP, A CORPORATION OR OTHER ENTITY, THE UNDERSIGNED GUARANTOR OR GUARANTORS EACH HEREBY CONTRACT AND GUARANTEE TO BAR-RAY PRODUCTS, INC., THE FAITHFUL PAYMENT, WHEN DUE, OF ALL ACCOUNTS OF SAID APPLICANT FOR PURCHASES MADE WITHIN FIVE (5) YEARS NEXT AFTER THE DATE OF THIS APPLICATION. THE UNDERSIGNED GUARANTOR OR GUARANTORS EACH HEREBY EXPRESSLY WAIVE ALL NOTICE OF ACCEPTANCE OF THIS GUARANTEE, NOTICE OF EXTENSION OF CREDIT TO APPLICANT, PRESENTMENT, AND DEMAND FOR PAYMENT ON APPLICANT, PROTEST AND NOTICE TO UNDERSIGNED GUARANTOR OR GUARANTORS OF DISHONOR OR DEFAULT BY APPLICANT OR WITH RESPECT TO ANY SECURITY HELD BY BAR-RAY PRODUCTS, INC. EXTENSION OF TIME OF PAYMENT TO APPLICANT, ACCEPTANCE OF PARTIAL PAYMENT OR PARTIAL COMPROMISE, ALL OTHER NOTICES TO WHICH THE UNDERSIGNED GUARANTOR OR GUARANTORS MIGHT OTHERWISE BE ENTITLED AND DEMAND FOR PAYMENT UNDER THIS GUARANTEE.

GUARANTOR

DATE

GUARANTOR

DATE

GUARANTOR

DATE

WHEN COMPLETE, PLEASE FAX BACK TO 717-359-9109.