



DEALER APPLICATION

To better assist your business, we would like to know your Owners/Partners/Managers (All information below is held confidential):

Name: _____ Title: _____
(Last) (First) (M.I.)
 Residence: _____
(Street) (City) (County) (State) (Zip)

Name: _____ Title: _____
(Last) (First) (M.I.)
 Residence: _____
(Street) (City) (County) (State) (Zip)

Trade References - Tell us whom you currently do business with (in the pet trade):

Account Name _____ Account Name _____
 City, State _____ / _____ City, State _____ / _____
 FAX _____ Phone _____ FAX _____ Phone _____

Account Name _____ Account Name _____
 City, State _____ / _____ City, State _____ / _____
 FAX _____ Phone _____ FAX _____ Phone _____



DEALER APPLICATION

TERMS OF SALE (MUST BE SIGNED BY ALL APPLICANTS)

By signing this application, and in consideration of the granting and extension of credit by BURLO PET SERVICES (Seller) to the undersigned Dealer (Buyer/Guarantor), it is hereby agreed that payments on all approved accounts shall be due and payable within thirty (30) days net upon Receipt of Goods however, if credit terms have not been granted, prepayment will be required until credit has been granted. Delinquent accounts shall bear a carrying charge of 1.5% per month (annual percentage rate of 18%) from date of accrual until paid. All claims of damaged or non-conforming goods must be made within five (5) days after receipt of goods or waived. No merchandise may be returned without prior consent. Should litigation or collection action become necessary, the Buyer/Guarantor agrees to pay all legal costs including collection agency fees, costs, legal costs, and reasonable attorney's fees, and any other expenses incurred by BURLO PET SERVICES, or their authorized agent, to enforce payment of the balance due on this account. The party signing this Agreement acknowledges that he/she will be individually liable for all charges including interest, attorney's fees and costs on this account and agrees that in the event collection or litigation becomes necessary, BURLO PET SERVICES may proceed against the individual Buyer/Guarantor without first proceeding against the Dealer (Wholesaler/Distributor) on this account. The undersigned agrees to provide a financial statement upon request. The party whose signature appears hereon acknowledges and agrees to these terms. In the event that the above referenced business is sold and/or changes ownership, the undersigned is responsible for any and all debt owed to Burlo Pet Services. A charge of \$25.00 will be added to any dishonored checks/instruments, in addition to any other charge permitted by Wisconsin law. Past due accounts are subject to credit restrictions. The laws of the State of Wisconsin shall only govern this Agreement, and jurisdiction shall only reside in the State of Wisconsin, Ozaukee County.

BURLO PET SERVICES reserves the right to refuse or discontinue sale to any party.

Buyer(s)/Guarantor(s) agrees to the above terms of sale and has read & agreed to the Burlo Pet Services Sales Policies. This signature certifies that the facts set forth in the above Dealer Application (page 1) and trade references (page 2) are true and complete.

Signature: _____

Print Name: _____ Date: _____

Signature: _____

Print Name: _____ Date: _____



DEALER APPLICATION

Trade Reference Request

DEALER APPLICANT: Please sign and print your name

The Buyer /Guarantor agrees that the information given for credit references is true and correct and BURLO PET SERVICES has authorization to make credit inquiries in order to establish credit worthiness of the undersigned.

Owner's Signature: _____

Print Name: _____ Date: _____

FOR CREDIT AUTHORIZATION OFFICIAL USE ONLY:

The party named above has submitted an application and has signed above for release of trade information to BURLO PET SERVICES, requesting extension of credit and has listed your company as a trade reference. Please provide the following information so that we may grant their request.

APPLICANT: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

CONTACT: _____

Date Account Opened: _____

High Credit: _____

Payment Terms: _____

Account Balance: _____

Past Due Balance: _____

Past Due as of: _____

NSF Checks?: _____

Additional Comments: _____

Signature/Title of Person Completing Credit Information: _____