

**I N T E R N A T I O N A L**  
**CONFIDENTIAL APPLICATION FOR CREDIT and TRADE RECOGNITION**



**W** WHITAKER HOUSE

1030 Hunt Valley Circle, New Kensington, PA 15068 USA    FED ID # 25-1210446

Please complete ALL of the following information in order to expedite the opening of your account. (Please print or type) Anchor Distributors sells at trade discounts to retail stores and approved wholesalers.

**GENERAL INFORMATION**

BILL TO \_\_\_\_\_  
Address \_\_\_\_\_  
Address \_\_\_\_\_  
Country Code + Phone No. \_\_\_\_\_  
Country Code + Fax No. \_\_\_\_\_  
Email \_\_\_\_\_  
VAT No. \_\_\_\_\_

**SHIPPING INFORMATION**

SHIP TO \_\_\_\_\_  
Address \_\_\_\_\_  
Address \_\_\_\_\_  
Country Code + Phone No. \_\_\_\_\_  
Country Code + Fax No. \_\_\_\_\_  
Email \_\_\_\_\_  
Canada Customers - Provide GST \_\_\_\_\_

**Sign Up** for online ordering at [www.anchor distributors.com](http://www.anchor distributors.com).    PASSWORD: (4 or more Characters) \_\_\_\_\_

**PROPRIETOR, PARTNER, or CORPORATE OFFICERS** (please provide HOME address)

NAME [1] _____	NAME [2] _____
Title _____	Title _____
Address _____	Address _____
Address _____	Address _____
Social Security # [if applicable] _____	Social Security # [if applicable] _____
Country Code + Phone # _____	Country Code + Phone # _____
Country Code + Fax # _____	Country Code + Fax # _____
Country Code + Mobile # _____	Country Code + Mobile # _____
Email _____	Email _____

**STORE MANAGER and OTHER CONTACTS**

Manager _____	Email _____
Book Buyer _____	Email _____
Payables _____	Email _____
Other Buyer _____	Email _____

**PAYMENT OPTIONS**

On which basis do you prefer to purchase: Prepay by Check  or \*Credit Card  Debit Card  Wire Transfer     Billing terms requested   
\*Credit Card # \_\_\_\_\_ Type \_\_\_\_\_ Expiration Date \_\_\_\_\_  
Name on Card \_\_\_\_\_  
Address Card is billed to \_\_\_\_\_

\*Certain transactions may require a copy of the card to be provided.

Has the firm or any of its principals ever been bankrupt or insolvent?     Yes     No

If yes, please explain \_\_\_\_\_

**FOR ESTABLISHED BUSINESSES**

Sales Last Year \$ \_\_\_\_\_    Sales two [2] years ago \$ \_\_\_\_\_    Projected Annual Sales \$ \_\_\_\_\_

**FOR NEW BUSINESSES**

**DESCRIPTION OF BUSINESS**

- Bookstore in main business district | shopping center
- Book department of retail store.  Internet Sales Website: \_\_\_\_\_
- College Bookstore  Church Bookstore  Other: \_\_\_\_\_

**STORE INFORMATION**

Date Established \_\_\_\_\_ Length of Ownership \_\_\_\_\_  
 CBA Membership # \_\_\_\_\_ Other memberships \_\_\_\_\_  
 [ ] Number of Employees – How many [ ] Full-time, [ ] Part-time ?  
 Own  Rent Monthly Payment \$ \_\_\_\_\_ Square Footage \_\_\_\_\_

**INDUSTRY REFERENCES** Please list those for which you have had an active open account.

BUSINESS NAME _____	BUSINESS NAME _____
Account Number _____	Account Number _____
Contact _____	Contact _____
Country Code + Phone # _____	Country Code + Phone # _____
Country Code + Fax # _____	Country Code + Fax # _____
Email _____	Email _____
 BUSINESS NAME _____	 BUSINESS NAME _____
Account Number _____	Account Number _____
Contact _____	Contact _____
Country Code + Phone # _____	Country Code + Phone # _____
Country Code + Fax # _____	Country Code + Fax # _____
Email _____	Email _____

**GOOD FAITH ACKNOWLEDGMENT**

Your account will be placed with an outside collection agency for pursuit of delinquent invoices if aging more than 45 days past the due dates per billing terms unless payment is made within ten days from receipt of any PAST DUE NOTIFICATION (written or verbal). Our actions will also be reported to the industry and Credit Bureaus resulting in an automatic loss of credit extension with Anchor.

**PLEASE READ AND SIGN BELOW THE AGREEMENT TO TERMS AND CONDITIONS OF SALE:**

The extension of credit for all orders is subject to credit approval. Anchor Distributors retains the right to withhold orders on delinquent accounts, and adjust credit limits. Authority is hereby given to bank and trade references allowing the release of credit history on this business to Anchor Distributors. A 1.5% service charge, (18% per annum), or the rate legally allowed by the law will be assessed to past due balances. Dishonored checks, including bank fees, must be paid in full according to the table of bad check laws that govern the debtor's jurisdiction. The debtor is responsible for all costs incurred by Anchor Distributors for securing bad debts, i.e. collection agencies, court costs and attorney fees. I acknowledge and agree to abide by the above terms and conditions of sale for the extension of credit. All answers are true and correct to the best of my knowledge. My signature attests to financial solvency, ability and willingness to pay all obligations as they come due.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Co-application: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

**PERSONAL GUARANTEE**

In the event this account becomes delinquent and satisfactory agreements have not been made for payment, all collection costs and attorney fees will be assumed by the debtor. By applying for credit, being accepted and signing this application, I agree to the above terms and conditions of sale. I assume personal responsibility for payment to Anchor Distributors. This guarantee and every part thereof shall extend to and be obligatory to my heirs, executors, administrators and assigns and shall insure to the benefit of Anchor Distributors and their successors and assigns.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_



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