



# Treestand Assassin®



Treestand Assassin, LLC / 8777 Whirlaway Lane / Newburgh, Indiana 47630  
Phone: 812-499-4510 / Email: TA@treestandassassin.com

## CREDIT APPLICATION AND PURCHASE TERMS AGREEMENT

TO APPLY FOR A TREESTAND ASSASSIN ACCOUNT, PLEASE SUBMIT ALL OF THE FOLLOWING INFORMATION:

1. This application must be completed and signed by an officer/owner of the company
2. A copy of your business/state sales tax license.
3. Proof of Business Status (business card, copy of phonebook listing, newspaper ad, store front photograph, etc)

TO ENSURE PROPER PROCESSING, THIS FORM MUST BE COMPLETED IN IT'S ENTIRETY.

### BUSINESS INFORMATION

COMPANY NAME:			
BILLING ADDRESS:			
CITY, STATE, ZIP:			
SHIPPING ADDRESS:			
CITY, STATE, ZIP:			
BUSINESS PHONE:		BUSINESS/TAX LICENSE #	
BUSINESS FAX:		FEDERAL IDENTIFICATION #	
WEBSITE ADDRESS:			
TYPES OF PRODUCTS SOLD			
NUMBER OF YEARS IN BUSINESS		# OF EMPLOYEES	_____ FULL TIME _____ PART TIME
TYPE OF BUSINESS	<input type="checkbox"/> PROPRIETORSHIP <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> CORPORATION <input type="checkbox"/> OTHER _____		
BUSINESS LOCATION:	<input type="checkbox"/> PART OF HOME <input type="checkbox"/> BLDG ON PREMISES <input type="checkbox"/> COMMUNITY BLDG		
TOTAL RETAIL SPACE (sq ft)		BUSINESS HOURS:	
ANNUAL SALES		AVERAGE INVENTORY DOLLARS:	
TRADE ORGANIZATION MEMBERSHIPS			

(NAME)	(TITLE)	(RESIDENCE ADDRESS)	(PHONE)
(NAME)	(TITLE)	(RESIDENCE ADDRESS)	(PHONE)
Has the company or any of its principals/owners and or guarantors been involved in a bankruptcy proceeding?			<input type="checkbox"/> YES <input type="checkbox"/> NO
If Yes, please describe the circumstances:			

### CONTACT INFORMATION

OWNER NAME:	
BUYER NAME AND CONTACT #	
BUYER EMAIL:	
ACCOUNTS PAYABLE NAME AND CONTACT:	
ACCOUNTS PAYABLE EMAIL:	

**CERTIFICATION OF TAX EXEMPTION STATUS**

NATURE OF BUSINESS	
TYPE OF EXEMPTION (CIRCLE EXEMPTIONS REASON CODE)	
CODE	DESCRIPTION
A	AGRICULTURAL OR INDUSTRIAL PRODUCTION
B	DIRECT PAY ENTER DP#
C	EXEMPT ORGANIZATION ENTER ES# OR TYPE OF GROUP
D	MOTOR CARRIER DIRECT PAY ENTER MCDP#
E	MULTIPLE POINTS OF USE
F	PERCENTAGE EXEMPTION <input type="checkbox"/> ADVERTISING (ENTER PERCENTAGE)    % <input type="checkbox"/> UTILITIES (ENTER PERCENTAGE)    %
G	RESALE
H	RESOURCE RECOVERY FACILITY ENTER CN#
I	OTHER ENTER TITLE

**TRADE REFERENCES & CREDIT REQUEST**

PAYMENT TERMS REQUESTED:	<input type="checkbox"/> C.O.D./PRE-PAYMENT <input type="checkbox"/> OPEN CREDIT; AMOUNT REQUESTED \$ _____
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**TRADE REFERENCES (MUST BE IN THE HUNTING INDUSTRY)**

NAME	ACCOUNT NUMBER	
PHONE #	FAX #	ITEMS PURCHASED
TERMS	<input type="checkbox"/> C.O.D./PRE-PAYMENT <input type="checkbox"/> OPEN CREDIT; AMOUNT \$ _____	
NAME	ACCOUNT NUMBER	
PHONE #	FAX #	ITEMS PURCHASED
TERMS	<input type="checkbox"/> C.O.D./PRE-PAYMENT <input type="checkbox"/> OPEN CREDIT; AMOUNT \$ _____	
NAME	ACCOUNT NUMBER	
PHONE #	FAX #	ITEMS PURCHASED
TERMS	<input type="checkbox"/> C.O.D./PRE-PAYMENT <input type="checkbox"/> OPEN CREDIT; AMOUNT \$ _____	
NAME	ACCOUNT NUMBER	
PHONE #	FAX #	ITEMS PURCHASED
TERMS	<input type="checkbox"/> C.O.D./PRE-PAYMENT <input type="checkbox"/> OPEN CREDIT; AMOUNT \$ _____	

**BANK REFERENCES**

NAME	ACCOUNT NUMBER	
PHONE #	FAX #	CONTACT PERSON
ACCOUNT TYPE	<input type="checkbox"/> LOAN <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS <input type="checkbox"/> LINE OF CREDIT	
NAME	ACCOUNT NUMBER	
PHONE #	FAX #	CONTACT PERSON
ACCOUNT TYPE	<input type="checkbox"/> LOAN <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS <input type="checkbox"/> LINE OF CREDIT	

WHOLESALE DEALER ACCOUNT TERMS & CONDITIONS

1. I hereby certify that I have the authority to apply for credit on behalf of Applicant(s) identified below and the Applicant(s) hereby authorize TREESTAND ASSASSIN, LLC ("Creditor") to investigate Applicant(s) credit history, bank references and any other sources of information deemed necessary to extend credit as allowed by the
2. All Sales are considered final. Returns, other than for defective product, are at the sole discretion of the creditor and require a Return Authorization Number (RA) from the creditor. Returns for other than defective product will assess a 15% restocking fee; and revocation of any promotions, specials, or other offers redeemed because of original sale.
3. Credit Applicant agrees to pay invoices in accordance with the Creditor's terms of sale, which are Net 30 Days from date of invoice unless otherwise specified on the invoice.
4. Credit Applicant(s) shall be responsible to pay Creditor a service charge of 1.5% per month (18% per annual) or the highest rate permitted by law, on any unpaid balance due over thirty (30) days.
5. Credit Applicant(s) is responsible for all costs of collection including reasonable attorney's fee incurred by creditor in collecting any amounts due it or enforcing its rights.
6. Credit Applicant(s) hereby gives a security interest to Creditor in all products purchased from the Creditor (now owned and hereafter acquired) to secure payment of any account balance owed.
7. Credit Applicant(s) affirms that all information herein together with all information submitted in connection with this application is true and accurate and that it will promptly notify Creditor if any information changes.
8. Credit Applicant(s) agrees to immediately notify Creditor for all shortages, price discrepancies or freight disputes.
9. All new dealers are subject to \$500 minimum prepaid first order.
10. A \$15.00 MINIMUM ORDER FEE will be added to all orders under \$500.00
11. Credit Applicant(s) acknowledge that a service charge of \$30 will be applied to each check returned for insufficient funds.
12. I/We give you our personal guarantee. For value received, including merchandise, services, or other valuable consideration, I hereby unconditionally guarantee at all times, full and prompt payment, upon demand, of any indebtedness which has been incurred under this agreement with TREESTAND ASSASSIN, LLC. I understand this to mean that I will personally guarantee payment of all debts and obligations under this agreement.

TREESTAND ASSASSIN, LLC. reserves the right to discontinue credit at any time without notice if above terms & conditions are not met or at the sole discretion of TREESTAND ASSASSIN, LLC.

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Please Print Name and Title

\_\_\_\_\_  
Authorized Signature of Officer/Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Phone Number