



# Account Application

## Customer Information:

Business Name: \_\_\_\_\_

Owners Name: \_\_\_\_\_

Name of Partners/Manager: \_\_\_\_\_

Physical (Delivery) Address: \_\_\_\_\_  
\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Billing Address (if different): \_\_\_\_\_  
\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### Contact Information:

Individuals Placing Orders: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_ Website: \_\_\_\_\_

Account Payable Contact(s): \_\_\_\_\_

Phone: \_\_\_\_\_ Fax \_\_\_\_\_

### Delivery Information:

Store Hours: \_\_\_\_\_ Receiving Hours (if different): \_\_\_\_\_

Delivery Directions: \_\_\_\_\_

### Business Information:

Business Type: (Check all that apply)

- RETAILER
- BREEDER
- BOARDER
- GROOMER/WASH
- OTHER \_\_\_\_\_

Business Class: (Check only one)

- SOLE PROP.
- PARTNERSHIP
- CORP. /LLC
- NON-PROFIT

BUSINESS FEDERAL TAX ID#: \_\_\_\_\_ - \_\_\_\_\_

BUSINESS REGISTRATION NUMBER (UBI): \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (MUST include copy)

Owners/Partners/Officers: \_\_\_\_\_ Title: \_\_\_\_\_

SSN/EIN: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Owners/Partners/Officers: \_\_\_\_\_ Title: \_\_\_\_\_

SSN/EIN: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business date open: \_\_\_\_\_

Bank Reference:

Business Bank (name and Location): \_\_\_\_\_

Bank Phone Number: \_\_\_\_\_

Contact Person at the Bank: \_\_\_\_\_

Trade/Suppliers References

Company Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Company Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Company Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Company Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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By signing this application/agreement, the individual executing this Application below on behalf of Buyer, individually & personally, represents and warrants to Independent Pet Supply:

- 1) he/she is authorized to execute this Application on behalf of Buyer;
- 2) the information set forth in signing this

application of the above, and hereby grants permission for credit information to be verified by company(ies) and financial institution(s) on this application.

I acknowledge that the terms offered by Independent Pet Supply are **DUE UPON RECEIPT**. Accounts may qualify for extended terms after a trial period of on-time payments have been received. Payments terms will only be extended up to 7-10 days if accounts qualify for extended terms.

Authorized Signature: \_\_\_\_\_ DATE: \_\_\_\_\_

Signatory Name (Print please): \_\_\_\_\_

Title: \_\_\_\_\_

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**\*\*All the information that is written above is warranted to be true. Applicant hereby authorizes Independent Pet Supply to investigate the trade references and financial reports.**



# Personal Guarantee

I/We have signed and carried this guarantee for the purpose set forth above on

(Date: MM/DD/YYYY), \_\_\_\_\_ (Please do not use corporate or business titles, as they are inapplicable)

Guarantor #1 (Individually and on behalf of his or her married community, if any): \_\_\_\_\_

Signature: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

SSN#: \_\_\_\_\_ Phone: \_\_\_\_\_

Guarantor #2 (Individually and on behalf of his or her married community, if any): \_\_\_\_\_

Signature: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

SSN#: \_\_\_\_\_ Phone: \_\_\_\_\_

Independent Pet Supply (IPS) requires this guarantee in order to sell goods (Pet Foods, and Supplies) to, and/or extend credit to the above named applicant. The Guarantor personally guarantees to Independent Pet Supply the prompt payment of any and all amounts due from the above named applicant to Independent Pet Supply for any reason. The Guarantor additionally guarantees the payment of interest at the maximum lawful rate on all outstanding balances to Independent Pet Supply, by the above named Applicant (s), together with collection costs and/or reasonable attorney's fees whether suit be brought or not, which Independent Pet Supply, may incur in the collection of any claims. Guarantor hereby submits himself and/or herself to the jurisdiction of the courts of Washington State with in King County in the event suit is brought in connection with any claims by Independent Pet Supply regarding the guarantee of payment.

Guarantor agrees to be certain by, and responsible for, the total obligation of Applicant, irrespective of whether Independent Pet Supply and Applicant settle or compromise the account.

Any wedded person who signs this guarantee agrees that recourse may be had to the Guarantor's separate property as well as his or her community property. This guarantee shall bind the individual heirs, representatives, administrators, successors and assigns of the undersigned and shall remain in effect regardless of whether the above-named applicant, goes in debt, files bankruptcy or otherwise no longer in business. Applicant hereby authorizes Independent Pet Supply to make such inquiry of financial and other matters. Guarantor approves Independent Pet Supply to gain and review consumer financial reports and credit information from credit reporting agencies for the purpose of evaluating the credit.

# *Independent Pet Supply Welcomes you to the Pet Industry!*



Phone 360-668-5050  
Fax 360-668-5252  
Toll Free 888-829-2981  
Toll Free Fax 888-687-3554

20124 Broadway Ave Building B. 101 Snohomish, WA 98296

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Please use the following guidelines to make sure all information is complete and returned properly.

1. Fill out and sign the Credit Application (must be legible).
2. If you have a form with credit information, we can use it in place of having you fill out the bank and trade reference portion of our application. We still must have the balance of the Credit Application completed and signed.
3. Mail us all original documents. We must have the originals for our files to open your account. No faxed copies please.
4. Your account must be sales tax exempt. An original signed re-sale certificate is included and is the only proof acceptable to the State Board of Equalization. We must have the original form or your orders will not be exempt from sales tax. All sales tax exempt numbers are checked for validity with the State Board of Equalization.

The order desk is open Monday through Friday from 9:00AM to 5:00PM. All orders must be placed by 12:00PM the day prior to your regularly scheduled delivery day or your will call day.

## SHIPPING INFORMATION

All orders within the:

- Puget Sound, Oregon areas must meet a minimum dollar value of \$350.
- Peninsula and in Eastern Washington are required to meet a minimum dollar value of \$500.
- Common carrier delivery for stores located outside of our normal delivery routes, minimum dollar value of \$500.
- A gas surcharge will be applied to each order, depending on the region.

An Outside Sales Representative will provide pricing for you after the above forms are received and processed. The volume of your projected business determines the support pricing used for your account. All prices are subject to change without notice.



## **Policies & Guidelines**

Phone Orders: (360) 668-5050 Fax Orders: (360) 668-5252

Hours of Operation: Monday – Friday 9:00am – 5:00pm

Order Placement: Orders may be placed via e-mail, website, by phone, or fax.

Ordering Deadline: 12:00 PM the day prior to delivery. Orders placed after 2:00 p.m. may not be processed in time for next day delivery. We will do our best to accommodate your emergency needs.

Customer Will-Call: Customers may pick up orders at any warehouse. We require 24-hour notice for pick-up prior to 11:00 am. Our customer will-call hours are 11:00am to 4:00pm.

Minimum Delivery: Minimum order for delivery is \$350.00. Washington Peninsula, Eastern Washington, and LTL Direct is \$500.00. All orders are subject to current fuel surcharges.

Fuel surcharges (subject to change due to fluctuations in market price) :

Puget Sound & Oregon Areas: \$9.00

Eastern WA and WA Peninsula: \$13.00

LTL Direct Deliveries: depending on location (please contact our office for quote)

Past Due Accounts: All past due accounts are subject to a 1½% finance charge (18% annually) on unpaid balances over terms. The customer shall also pay all costs of collection including fees from collection agents, attorney fees, and court costs.

Prices: All prices are subject to change without notice.

Who Can Buy: We are wholesale only. To be eligible to buy from Independent Pet Supply you must meet the following requirements:

- Have a place of business
- Have a state tax resale number or certificate

## **Returns & Credit Policy**

At the time of delivery, inspect all products from IPS. Damages, shortages, or mis-picked items should be reported to your IPS Driver at that time, and noted on your invoice.

Special handling and restocking fees for all returns may apply. Independent Pet Supply reserves the right to inspect all returned goods prior to issuing credit.