

## PET PALETTE LLC New Retailer Application Please Print Neatly

<b>Business Information</b>				
Retailer Name	Telephone Number	Fax Number	Website	
Billing Address	City	 State	Zip Code	
billing Address	City	State	Zip Code	
Shipping Address	City	State	Zip Code	
Owner's Name	Title/Position	Email Addres		
owner s rraine	Title, Fosteron	Zillali / laares		
Buyer's Name	Title/Position	Email Addres	SS	
Company Informatio	n			
Fed Tax ID#	Sales Tax Exempt #	Year Established	Number of Employees	
Type of Business: (Please check below)				
Type of Busiliess. (Fie	ase check below)			
Corporation Partnership Proprietorship LLC				
Business Location Type				
Brick and Mortar Retailer Internet Only Storefront and Internet				
PLEASE NOTE: Pet Palette is NOT currently accepting Online Third-Party Resellers (Amazon, eBay, Jet.com,				
Walmart.com, etc)				
You must provide ALL internet sites that you would be selling our product on.				
Rank/Trade Insuranc	e – List Trade References that	you currently order from	m with Open Account Terms	
	ontact Account Nu			
- Dank	antast Account Nu	Email Au	Tax Number	
Trade (	Contact Account No	ımber Email A	ddress Fax Number	
	Contact Account No	ımbor Fmail A	ddross Fay Number	
Trade (	Contact Account Nu	ımber Email A	ddress Fax Number	



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I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained here. In the event credit is extended, Customer shall pay all invoices when due and pay interest on overdue accounts as recorded on Pet Palette Invoices and acknowledges that Pet Palette may change such conditions from time to time. Standard payment terms are net 30 for all business, unless agreed to in writing and signed by Pet Palette. A service charge of one and one-half percent monthly (1 ½ % monthly) may be assessed on all delinquent bills. Customer agrees to submit payment to Pet Palette in full for all services rendered (without deduction or setoff), on the due date of each billing, at: [Attention: AR Department, Pet Palette, 1332 Londontown Blvd Suite 230. Sykesville, MD 21784]. All accounts MUST provide a current resellers permit with application.

X	
Signature	Date
Print Name and Title	