

# Discount Wholesale Inc

Customer #  
OFFICE USE ONLY v111419

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## CUSTOMER APPLICATION

NEW ACCOUNT

CHANGE OF INFORMATION

D.B.A Name: \_\_\_\_\_

Name of Corporation (LLC / Inc): \_\_\_\_\_

Sales Tax ID / Tax Exempt: \_\_\_\_\_ Federal Tax ID: \_\_\_\_\_

Other License(s) \_\_\_\_\_

Corporation Type:  LLC  Inc.  Proprietor \_\_\_\_\_ Other

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

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Contact Email: \_\_\_\_\_  
Email can be used for communication purpose by JJ, not limited to AR, promotions, flyers etc.

Business Telephone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Business Fax: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Current Supplier: \_\_\_\_\_ Other Supplier: \_\_\_\_\_

Type of Operation:  Gas Station  C-store  Smoke Shop  Liquor Store  Grocery Store \_\_\_\_\_ Other

1 <sup>st</sup> Owner: _____ Phone # _____ Cell # _____ SSN # _____ Valid ID # _____ Issued State: _____ Expires: _____ <b>ATTACH PHOTOCOPY OF YOUR VALID STATE ISSUED ID</b>	2 <sup>nd</sup> Owner: _____ Phone # _____ Cell # _____ SSN # _____ Valid ID # _____ Issued State: _____ Expires: _____ <b>ATTACH PHOTOCOPY OF YOUR VALID STATE ISSUED ID</b>
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Manager(s): \_\_\_\_\_ Phone # \_\_\_\_\_

Authorized Buyer(s): \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Name & Signature of Legal Owner(s) of above mentioned Corporation (Registered with State or Federal)

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

Retailer must submit a copy of valid Sales Tax Certificate, Valid Federal ID, Owner's valid State ID, Voided check for ACH with this application

# Discount Wholesale Inc

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## GUARANTY & AGREEMENT

I, \_\_\_\_\_ residing at \_\_\_\_\_,

I am requesting for consideration of your extending credit at my request to \_\_\_\_\_

(herein referred to as in the "Company") of which I am (Title): \_\_\_\_\_, hereby personally guarantee to you payment of any obligation of the Company and I hereby by agree to bind myself to pay Discount Wholesale Inc on demand any sum which may become due to Discount Wholesale Inc by the Company whenever the Company shall fail to pay the same. It is understood that the guaranty shall be continuing and irreversible guaranty and identify for such indebtedness of the Company. I do hereby waive notice of default, non-payment and notice thereof and consent to any modification or renewal of the credit agreement hereby guarantee, and to all renewals of extension of credit. The undersigned guarantor agrees to pay, in the event the amount becomes delinquent and turned over to an attorney for collection, attorney's fee equal to 33 $\frac{1}{3}$ % of the balance due plus all attendant collection costs. It is understood that this guaranty may be enforced without first having to sue the corporation or business which incurred the debt for purpose of the guarantee it is agreed that I will be responsible for the corporate or business debt even though my name does not appear on the Invoices, Purchase Order, Billing or Accounting.

1. Services Provided by Discount Wholesale Inc: Discount Wholesale Inc agrees to be a non-exclusive supplier of Tobacco products and other convenience store products to the Customer as those products may from time to time be ordered by the Customer.
2. **Terms of Payment:** The Customer has or will be given specific payment terms which will be contained in an Invoices sent to the Customer. Customer agrees that the Invoices will be paid according to terms agreed upon and designated on the Invoices. Customer further agrees that if the Invoice is disputed, Customer will immediately notify Discount Wholesale Inc of the nature of the dispute.
3. **Penalty for Late Payment:** Customer agrees that any Invoices or portion thereof that is more than 30 days past due will be subject to interest at 18% per annum on all past due amounts.
4. Jurisdiction and Costs: In the event, Discount Wholesale Inc pursues collection of the past due Invoices through judicial means, Customer agrees to submit to jurisdiction and venue in Jefferson Count, Kentucky and further agrees that Discount Wholesale Inc may recover expenses and reasonable attorney fees associated with recovering the past due amounts.
5. Any account that does not pay within the specified terms agreed to will automatically be put on Credit Hold, immediately after the invoice comes due, and not be shipped to until the balance is paid to within the terms agreed upon.
6. If Discount Wholesale Inc gets more than one check returned due to any reason, that account may/will be put on C.O.D. cash only or cashier's check for future shipment, immediately.
7. Any accounts that has a check returned to Discount Wholesale Inc due to any reason, will be charged a \$50.00 service charge (per returned check).
8. Any account that has agreed to specific terms with Discount Wholesale Inc, must adhere to those terms. By signing this agreement, you allow Company to electronically debit your account for the principle amount of the check presented for transaction. In case of returned check, we may also generate a draft or electronically debit your account for the service fee amount in addition to principle amount due as allowed by law (We charge at least \$100 for any returned check/ Returned ACH).
9. At no time will terms be changed, without review from our Accounts Receivable Department.

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

Account Name: \_\_\_\_\_ Date: \_\_\_\_\_

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# State of Mississippi Resale Certificate

To: \_\_\_\_\_

The undersigned hereby certifies that the merchandise purchased on each order we shall give, and until this notice is revoked by us in writing, is purchased for resale as tangible personal property or resale as a service subject to tax. As purchaser of such goods and services, we are solely responsible for any sales or use tax due thereon.

We further agree to reimburse you for any and all sales and use tax which you became legally obligated to pay to the State of Mississippi on orders which you received from us. It is our intention and purpose to indemnify and hold you harmless for all costs incurred by you for your reliance on this Resale Certificate furnished by us.

**SALES TAX REGISTRATION  
OF PURCHASE:** \_\_\_\_\_

**Date:** \_\_\_\_\_

\_\_\_\_\_  
**Purchaser**

**By:** \_\_\_\_\_

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

\_\_\_\_\_

**WARNING:**

**This blanket Certificate of Resale must be completed and signed before it is valid.**

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EFT CUSTOMER AUTHORIZATION FORM

AUTHORIZATION AGREEMENT FOR AUTOMATIC DEBITS

NEW ACCOUNT       CHANGE OF INFORMATION

Business Name / D.B.A Name: \_\_\_\_\_

I hereby authorize Discount Wholesale Inc, hereafter called "Company", to initiate debit entries to my account with the depository named below that is authorized for the debit and credit transactions.

Depository Bank Name: \_\_\_\_\_ Phone No: \_\_\_\_\_

Bank Transit/ Routing/ ABA No.: \_\_\_\_\_ Bank Account Number: \_\_\_\_\_

RETAILER'S (STORE'S) EMAIL ADDRESS - NEED TO SEND / RECEIVE NOTIFICATION OF BANK TRANSECTION(S)

PLEASE PROVIDE A CANCELED CHECK FOR VARIFICATION PURPOSE

This authority is to remain in full force and in effect until Company has received written notification from retailers of its termination and in such time and manner as to afford Company and depository a reasonable opportunity to act on it. In case of Non-payment on check - ACH will be submitted from the same account from which check has been returned.

I understand that Discount Wholesale Inc requires 14 days advance written notice for any changes in the Bank Account, Transit (ABA) or request for cancellation of the EFT (ACH) process.

Authorized Person's Name: \_\_\_\_\_

Authorized Person's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

OFFICE USE ONLY

Bank Code: \_\_\_\_\_ ACH Term: \_\_\_\_\_ Sales Person: \_\_\_\_\_

Delivery Day: \_\_\_\_\_ ACH (EFT) Day: \_\_\_\_\_ Customer No.: \_\_\_\_\_