



4900 S. 9th Street - Kalamazoo, MI 49009-9552

Customer Service: Ph: (800) 253-9885 Fax: (800) 234-9150

Credit/Accounting Department: Ph: (800) 234-4909 Fax: (800) 305-3513

Website: www.edwardsgarment.com

ACCOUNT PROFILE / CREDIT APPLICATION

Form with fields for Date, Sold To, Legal Name, Address, City, State, Zip, Ship To, Telephone, Fax, and an INTERNAL USE ONLY box containing CUST. #, D&B, SALES REP, CR RESP, CR LIMIT, DISCOUNT, SALES TAX, and COUNTY.

Form with columns for Name of Principal(s) and Name of Contact(s), including fields for Authorized Buyer and General Manager.

If Applicant, Affiliates or Principals have ever done Business with Edwards, List Name & Address:

Applicant Information section including Corp./LLC + Date Inc., Partnership + # Years, Sole Proprietor + # of Years, and Type of Business by % (Manufacturer, Uniform Wholesale/Retail, Laundry, Embroidery/Screenprinting, Promotional Products).

Requested Credit Limit and Anticipated Annual Purchases fields.

Are You Sales Tax Exempt?: No Yes State: (If yes, completed exemption form must be on file)

Edwards Shipping Policy: Orders are normally shipped ground by carriers selected at the discretion of Edwards. Special shipping instructions must be provided to customer service with your order...

Applicant Shipping Instructions: Do you require compliance with a routing guide?: No Yes (If yes, please attach the proper routing instructions.)

How do you wish to receive your invoices: (Please check One) E-Mail: Fax:

How did you hear about us? Advertisement Press Release Trade Show Established Customer Web Site Other

Do you have any additional locations you would like to establish an account for? If so, please attach information for each location (company name, contact name, address, phone, fax, email)



Account Profile/Credit Application (continued)

Bank Reference:

Name: _____ Contact: _____

City: _____ State: _____ Phone: _____

Checking Acct.#: _____ Savings Acct.#: _____

Loan(s) Acct. #: _____

Trade References:

1. Supplier's Name: _____ City: _____ State: _____

Phone: _____ Fax: _____ Acct. #: _____

2. Supplier's Name: _____ City: _____ State: _____

Phone: _____ Fax: _____ Acct. #: _____

3. Supplier's Name: _____ City: _____ State: _____

Phone: _____ Fax: _____ Acct. #: _____

4. Supplier's Name: _____ City: _____ State: _____

Phone: _____ Fax: _____ Acct. #: _____

Terms and Conditions:

I have completed this application to obtain credit, and certify that all statements contained herein are true and correct. I am authorized by the credit applicant to execute this document on its behalf. Applicant agrees that credit inquiries may be made, and authorizes the release of such information to Edwards. Applicant agrees that any credit granted shall be paid promptly in accordance with Edwards (Net 30 Day) terms, pricing and policies (Edwards policies are included in our published price list). Applicant also agrees in the event any terms or pricing on a purchase order executed by Applicant are inconsistent with Edwards' terms, pricing and policies; Edwards terms, pricing and policies shall take precedence. Edwards must consent to any modifications in writing. Applicant must notify Edwards in writing of any change in legal structure and/or ownership. In the event other entities or individuals order merchandise using the Applicant's account without Edwards receiving proper written notification, it is agreed that both the Applicant and/or such other entities or individuals receiving the merchandise shall be obligated for all amounts due

Applicant agrees that credit may be cancelled/revoked at any time without notice, and in the event of default, to pay collection charges, actual attorney fees, and court costs. Edwards may change credit limits or other credit terms at any time, in its sole discretion. Edwards also reserves the right to suspend performance on any purchase order until payment is received for any unpaid past due balance. Applicant agrees to examine merchandise immediately upon receipt, and to advise Edwards of any disputed transactions within 10 days of receipt. Failure to notify Edwards of any dispute with respect to defective goods shall constitute a waiver of all such disputes. service charges up to 1½% per month, or the maximum amount allowed by law, to any balance not paid in accordance with Edwards' terms and conditions. These terms and conditions are governed by the laws of the State of Michigan, and if suit is necessary to recover payment, state and federal courts whose district include Kalamazoo County, Michigan, have jurisdiction and proper venue.

Authorized Signature: _____ Date: _____

Title: _____



New York State Department of Taxation and Finance
New York State and Local Sales and Use Tax
Resale Certificate

ST-120
(1/11)

Name of seller Edwards Garment Company			Name of purchaser		
Street address 4900 S. 9th Street			Street address		
City Kalamazoo	State MI	ZIP code 49009	City	State	ZIP code

Mark an **X** in the appropriate box: Single-use certificate Blanket certificate
 Temporary vendors must issue a single-use certificate.

To the purchaser:
 You may not use this certificate to purchase items or services that are not for resale. If you purchase tangible personal property or services for resale, but use or consume the tangible personal property or services yourself in New York State, you must report and pay the unpaid tax directly to New York State. Any misuse of this certificate will result in tax liabilities and substantial penalty and interest.

Purchaser information – please type or print
 I am engaged in the business of _____ and principally sell apparel
(Contractors may not use this certificate to purchase materials and supplies.)

Part 1 – To be completed by registered New York State sales tax vendors

I certify that I am:

- a New York State vendor (including a hotel operator or a dues or admissions recipient), show vendor or entertainment vendor. My valid *Certificate of Authority* number is _____
- a New York State temporary vendor. My valid *Certificate of Authority* number is _____ and expires on _____

I am purchasing:

- A.** Tangible personal property (other than motor fuel or diesel motor fuel)
- for resale in its present form or for resale as a physical component part of tangible personal property;
 - for use in performing taxable services where the property will become a physical component part of the property upon which the services will be performed, or the property will actually be transferred to the purchaser of the taxable service in conjunction with the performance of the service; or
- B.** A service for resale, including the servicing of tangible personal property held for sale.

Part 2 – To be completed by non-New York State purchasers

I certify that I am not registered nor am I required to be registered as a New York State sales tax vendor. I am registered to collect sales tax or value added tax (VAT) in the following state/jurisdiction _____ and have been issued the following registration number _____ (If sales tax or VAT registration is not required and a registration number is not issued by your home jurisdiction, indicate the location of your business and write **not applicable** on the line requesting the registration number.)

I am purchasing:

- C.** Tangible personal property (other than motor fuel or diesel motor fuel) for resale, and it is being delivered directly by the seller to my customer or to an unaffiliated fulfillment services provider in New York State.
- D.** Tangible personal property for resale that will be resold from a business located outside New York State.

Certification: I certify that the above statements are true, complete, and correct, and that no material information has been omitted. I make these statements and issue this exemption certificate with the knowledge that this document provides evidence that state and local sales or use taxes do not apply to a transaction or transactions for which I tendered this document and that willfully issuing this document with the intent to evade any such tax may constitute a felony or other crime under New York State Law, punishable by a substantial fine and a possible jail sentence. I understand that this document is required to be filed with, and delivered to, the vendor as agent for the Tax Department for the purposes of Tax Law section 1838 and is deemed a document required to be filed with the Tax Department for the purpose of prosecution of offenses. I also understand that the Tax Department is authorized to investigate the validity of tax exclusions or exemptions claimed and the accuracy of any information entered on this document.

Type or print name and title of owner, partner, or authorized person of purchaser	
Signature of owner, partner, or authorized person of purchaser	Date prepared

Substantial penalties will result from misuse of this certificate.