



THOMPSON TRADERS
 P.O. BOX 7404
 Greensboro, NC 27417
 Phone: 336-272-3003
 Fax: 336-272-3014

CREDIT APPLICATION

BUSINESS TYPE:

SHOWROOM

DESIGNER

CONTRACTOR/BUILDER

WHOLESALE DISTRIBUTOR

OTHER: _____

COMPANY INFORMATION:

 FIRM NAME

 MAILING ADDRESS

 SHIPPING ADDRESS

 FAX NUMBER

 TELEPHONE NUMBER

LEGAL FORM OF OWNERSHIP: CORPORATION PARTNERSHIP SOLE PROPRIETORSHIP

NUMBER OF EMPLOYEES _____ SQUARE FOOTAGE OF BUILDING _____ OWN RENT

FEDERAL ID NUMBER _____ HOW LONG IN BUSINESS _____

(Please attach a copy of you tax certificate if purchases are exempt)

BANK INFORMATION:

 BANK NAME

 CONTACT NAME

 BANK ADDRESS

 ACCOUNT NUMBER

 FAX NUMBER

 PHONE NUMBER

MAJOR SUPPLIERS - Reference Information:

COMPANY NAME	CITY AND STATE	FAX NUMBER	PHONE NUMBER

CORPORATE OFFICERS:

 CORPORATE OFFICER NAME TITLE RESIDENCE ADDRESS RESIDENCE PHONE

 CORPORATE OFFICER NAME TITLE RESIDENCE ADDRESS RESIDENCE PHONE

 CORPORATE OFFICER NAME TITLE RESIDENCE ADDRESS RESIDENCE PHONE

As duly authorized Owner/Officer of _____, I, the undersigned, warrant that the information herein given is correct and request that standard credit terms be extended by Thompson Trades, Inc. to our company base on this information. I/We authorize Thompson Traders, Inc to verify our credit background and further authorize our references to release information directly to Thompson Traders, Inc. for such verification.

 SIGNATURE

 TITLE

 DATE

TERMS AND CONDITIONS OF SALE

Order Acceptance: All orders subject to credit approval and factory acceptance.

Prices: Prices are subject to change without notice.

Terms: First order prepay or credit card. Second order 30% deposit balance net 30. Third order and subsequent orders Net 30 if no late payments. A finance charge of 1.5% per month (18% per annum) will be assessed on past due invoices. No new orders will be shipped when overdue invoices exist. A deposit may be required on some items prior to manufacture or at the discretion of the factory All custom orders will require a 50% deposit upon acceptance.

Freight: Normal transportation costs will be prepaid and added to invoice.

Claims: All product is shipped F.O.B. Factory in good condition with title of the merchandise passing to the buyer upon delivery to common carrier. The buyer has responsibility for immediately inspecting goods upon delivery. Any claim for shortage or breakage must be noted on freight Bill of Lading and filed promptly with the carrier. In the event of concealed damage, or if there was any visible damage, carrier should be notified immediately and an inspection requested. Contact Thompson Traders, Inc. if UPS is involved. Hold all damaged goods with packing material intact until inspection is completed. Although our responsibility of shipment ends with acceptance by the carrier, we will assist, if necessary, in satisfaction of claims.

Web Policy: Customer agrees to that any product offered on the web will be at the same price it is offered in the store.

Quotations: Prices are firm for 30 days unless otherwise specified.

Delivery Date: Due to circumstances beyond our control, estimated delivery dates are subject to change. Therefore, Thompson Traders, Inc. accepts no liquidated damage claims resulting from such delays.

Hold Orders: Orders to be released at a future date will be produced with a 50% deposit and held until the specified date. After the specified date payment in full will be required to continue holding the order.

Minimum Order: Thompson Traders, Inc. has no minimum order.

Cancellations: Special orders and orders for non-stocked items are subject to a 50% cancellation fee. Other orders may be cancelled before shipment. If an order is canceled after shipment, or if delivery is refused at destination there will be 25% restocking fee.

Returns: No special order merchandise may be returned. No merchandise may be returned without obtaining a Return Goods Authorization number. Credit or refund will be issued for merchandise received in good condition, in the original packaging within three months of the original invoice date. There will be a deduction of freight charges both ways and a restocking charge of 25%.

Specifications: We reserve the right to modify or discontinue products without prior notice.

Dealer/Distributor Programs: One time 50% discount off of list price for 1-6 items purchased for displays. One time 50% plus 10% off of list for 6 or more items purchased for displays. Opening an account receive 40% discount off of list for any purchases made. Contact sales agent for display tree options

5 YEAR LIMITED WARRANTY

Thompson Traders, Inc. warrants its products to be free of manufacturing and material defects for 5 years from the date of purchase. Dimensions are approximate and can vary + or - .5 inches. Thompson Traders, Inc. will not be responsible for changes in the finish, abuse of the sink or incorrect cleaning.

Streamlined Sales and Use Tax Agreement

Certificate of Exemption

This is a multi-state form. Not all states allow all exemptions listed on this form. Purchasers are responsible for knowing if they qualify to claim exemption from tax in the state that would otherwise be due tax on this sale. The seller may be required to provide this exemption certificate (or data elements required on the form) to a state that would otherwise be due tax on this sale.

The purchaser will be held liable for any tax and interest, and possibly civil and criminal penalties imposed by the member state, if the purchaser is not eligible to claim this exemption. A seller may not accept a certificate of exemption for an entity-based exemption on a sale made at a location operated by the seller within the designated state if the state does not allow such an entity-based exemption.

- 1** Check if you are attaching the Multistate Supplemental form.
 If not, enter the two-letter postal abbreviation for the state under whose laws you are claiming exemption.
- 2** Check if this certificate is for a single purchase and enter the related invoice/purchase order # _____.

3 Please print

Name of purchaser _____

Business address _____ City _____ State _____ Zip code _____

Purchaser's tax ID number _____ State of issue _____ Country of issue _____

If no tax ID number, enter one of the following:	FEIN	Driver's license number/State issued ID number <i>state of issue</i> <i>number</i>	Foreign diplomat number
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Name of seller from whom you are purchasing, leasing, or renting _____

Seller's address _____ City _____ State _____ Zip code _____

4 Type of business. Check the number that describes your business.

- | | |
|--|--|
| <input type="checkbox"/> 01 Accommodation and food services | <input type="checkbox"/> 11 Transportation and warehousing |
| <input type="checkbox"/> 02 Agricultural, forestry, fishing, and hunting | <input type="checkbox"/> 12 Utilities |
| <input type="checkbox"/> 03 Construction | <input type="checkbox"/> 13 Wholesale trade |
| <input type="checkbox"/> 04 Finance and insurance | <input type="checkbox"/> 14 Business services |
| <input type="checkbox"/> 05 Information, publishing, and communications | <input type="checkbox"/> 15 Professional services |
| <input type="checkbox"/> 06 Manufacturing | <input type="checkbox"/> 16 Education and health-care services |
| <input type="checkbox"/> 07 Mining | <input type="checkbox"/> 17 Nonprofit organization |
| <input type="checkbox"/> 08 Real estate | <input type="checkbox"/> 18 Government |
| <input type="checkbox"/> 09 Rental and leasing | <input type="checkbox"/> 19 Not a business |
| <input type="checkbox"/> 10 Retail trade | <input type="checkbox"/> 20 Other (<i>explain</i>) _____ |

5 Reason for exemption. Check the letter that identifies the reason for the exemption.

- | | |
|---|--|
| <input type="checkbox"/> A Federal government (<i>department</i>) _____ | <input type="checkbox"/> H Agricultural production # _____ |
| <input type="checkbox"/> B State _____ government (<i>name</i>) _____ | <input type="checkbox"/> I Industrial production/manufacturing # _____ |
| <input type="checkbox"/> C Tribal government (<i>name</i>) _____ | <input type="checkbox"/> J Direct pay permit # _____ |
| <input type="checkbox"/> D Foreign diplomat # _____ | <input type="checkbox"/> K Multiple points of use (services, digital goods, or computer software delivered electronically) |
| <input type="checkbox"/> E _____ | <input type="checkbox"/> L Direct mail # _____ |
| <input type="checkbox"/> F _____ | <input type="checkbox"/> M Other (<i>explain</i>) _____ |
| <input type="checkbox"/> G Resale # _____ | |

6 Sign here. I declare that the information on this certificate is correct and complete to the best of my knowledge and belief.

Signature of authorized purchaser _____ Print name here _____ Title _____ Date _____
