



5377 Brooks Street, Montclair, CA 91763  
 Tel: 909-625-8899 Fax: 909-625-8933

<b>Store Information</b>	Store Name	Phone:	Fax:
	Store Address (Street, City, State, Zip, Country)		
	Business Name: (DBA or Legal Trade Name (if applicable))		
	Business Type:	Email Address:	
	Resale Certificate or License Number ( <b>REQUIRED</b> for stores located in California)	Tax ID / EIN Number (s)	

<b>Reference #1</b>	Reference # 1 Name:	Phone:	Fax (REQUIRED)
	Address (Street, City, State, Zip, Country)		
	Contact:	Terms of Sale:	Credit Limit (if applicable)

<b>Reference #2</b>	Reference # 1 Name:	Phone:	Fax (REQUIRED)
	Address (Street, City, State, Zip, Country)		
	Contact:	Terms of Sale:	Credit Limit (if applicable)

<b>Reference #3</b>	Reference # 1 Name:	Phone:	Fax (REQUIRED)
	Address (Street, City, State, Zip, Country)		
	Contact:	Terms of Sale:	Credit Limit (if applicable)

	Name and Branch Location:	Branch Phone:	Branch Fax:
	Branch Address (Street, City, State, Zip, Country)		
	Account Numbers(s): Checking, Savings, Credit / Operating Lines		
	Credit Limit:	Balance	



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**Please initial each line. Then sign below:**

\_\_\_\_\_ I understand that C&K Import Designs, Inc. Accepts credit cards, credit terms or other terms as negotiated before order placement.

\_\_\_\_\_ I agree to pay for my order, otherwise I understand that I will be held responsible for debt collection fees.

\_\_\_\_\_ I agree that I must pay my invoices on time to stay on credit terms with C&K Import Designs

\_\_\_\_\_ I understand that I will be assessed a \$25 fee for returned NSF checks.

\_\_\_\_\_ I understand that a finance charge of 1.5% per month on the unpaid balance accrues from the due date of my invoice. This is an annual percentage rate of 18% simple interest.

\_\_\_\_\_ By Signing this form, I grant the above listed references permission to release credit information to C&K Import Designs, Inc.

\_\_\_\_\_ I understand that no further changes can be made once my order is submitted to C&K Import Designs, Inc.

\_\_\_\_\_ I agree to pay all shipping charges and accept C&K Import Designs, Inc.'s shipping methods

\_\_\_\_\_ I agree that any return requests for damaged items must be made within 14 days of order delivery.

\_\_\_\_\_ I understand that C&K Import Designs, Inc. reserves the right to deny, cancel, or stop distribution of merchandise and services at any time.

**DESIRED PAYMENT TERMS (REQUIRED)**

**Indicate desired payment terms:**       Credit Card       Money order/Personal check

Credit Card #: \_\_\_\_\_ Exp Date: \_\_\_\_\_ CVC: \_\_\_\_\_ Billing Zip \_\_\_\_\_

By signing this agreement Buyer acknowledges that they have read and fully understands the terms of sale agreement.

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

STORE NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_