



21673 Cedar Ave S.
 Lakeville MN 55044
 Tel: 540.877.2769
 Fax: 952.236.6458

Office use only	
Credit Terms	
Credit Limit	
Date Approved	
Account #	
Price Level	
Order Dept. Notified	

Dealer Application And Purchase Terms Agreement

To apply for an AOG account, please submit all of the following information:

- 1 This application must be completed and signed by an officer/owner of the company
- 2 A copy of your business/state sales tax license
- 3 Proof of business status (business card, copy of phonebook listing, newspaper as, store front photograph, etc.)

To ensure proper processing, this form must be completed in it's entirety.

BUSINESS INFORMATION			
COMPANY NAME			
BILLING ADDRESS			
CITY, STATE, ZIP			
SHIPPING ADDRESS			
CITY, STATE, ZIP			
BUSINESS PHONE		BUSINESS/TAX LICENSE #	
BUSINESS FAX		FEDERAL IDENTIFICATION #	
WEBSITE ADDRESS			
TYPES OF PRODUCTS SOLD			
NUMBER OF YEARS IN BUSINESS		# OF EMPLOYEES	FULL TIME _____ PART TIME _____
TYPE OF BUSINESS	SOLE PROP _____ PARTNERSHIP _____ CORPORATION _____ OTHER _____		
BUSINESS LOCATION	PART OF HOME _____ BLDG ON PREMISES _____ COMMUNITY BLDG _____		
TOTAL RETAIL SPACE (sq ft)		BUSINESS HOURS	
ANNUAL SALES		AVERAGE INVENTORY DOLLARS	
TRADE ORGANIZATION MEMBERSHIPS			
OWNERSHIP INFORMATION			
(NAME)	(TITLE)	(RESIDENCE ADDRESS)	(PHONE)
(NAME)	(TITLE)	(RESIDENCE ADDRESS)	(PHONE)
Has the company or any of its principals/owners and or guarantors been involved in a bankruptcy proceeding? Yes _____ No _____			
If Yes, please describe the circumstances:			
CONTACT INFORMATION			
OWNER NAME			
BUYER NAME AND CONTACT #			
BUYER EMAIL			
ACCOUNTS PAYABLE NAME AND CONTACT #			
ACCOUNTS PAYABLE EMAIL			

CERTIFICATE OF TAX EXEMPTION STATUS

NATURE OF BUSINESS _____

TYPE OF EXEMPTION (circle)

CODE

DESCRIPTION

A AGRICULTURAL OR INDUSTRIAL PRODUCTION

B DIRECT PAY ENTER DP#

C EXEMPT ORGANIZATION ENTER ES# OR TYPE OF GROUP

D MOTOR CARRIER DIRECT PAY ENETER MCDP#

E MULTIPLE POINTS OF USE

F PERCENTAGE EXEMPTION _____ ADVERTISING (enter percentage) _____ % UTILITIES (enter percentage) _____ %

G RESALE

H RESOURCE RECOVERY FACILITY ENTER CN#

I OTHER ENTER TITLE

TRADE REFERENCES AND CREDIT REQUEST

PAYMENT TERMS REQUESTED: _____ PRE-PAYMENT _____ OPEN CREDIT- AMOUNT REQUESTED \$ _____

TRADE REFERENCES (MUST BE IN THE HUNTING INDUSTRY)

NAME

ACCOUNT NUMBER

PHONE #

FAX #

ITEMS PURCHASED

TERMS

COD/PRE-PAY _____ OPEN CREDIT-AMOUNT\$ _____

NAME

ACCOUNT NUMBER

PHONE #

FAX #

ITEMS PURCHASED

TERMS

COD/PRE-PAY _____ OPEN CREDIT-AMOUNT\$ _____

NAME

ACCOUNT NUMBER

PHONE #

FAX #

ITEMS PURCHASED

TERMS

COD/PRE-PAY _____ OPEN CREDIT-AMOUNT\$ _____

BANK REFERENCES

NAME

ACCOUNT #

PHONE #

FAX #

CONTACT PERSON

ACCOUNT TYPE LOAN _____ CHECKING _____ SAVINGS _____ LINE OF CREDIT _____

NAME

ACCOUNT #

PHONE #

FAX #

CONTACT PERSON

ACCOUNT TYPE LOAN _____ CHECKING _____ SAVINGS _____ LINE OF CREDIT _____

WHOLESALE DEALER ACCOUNT TERMS & CONDITIONS

- I hereby certify that I have the authority to apply for credit on behalf of Applicant(s) identified below and the Applicant(s) hereby authorize AOG (Creditor) to investigate Applicant(s) credit history, bank references and any other sources of information deemed necessary to extend credit as allowed by the Federal Credit Reporting Act and applicable State Law.
- All Sales are considered final. Returns, other than for defective product, are at the sole discretion of the creditor and require a Return Authorization Number (RA) from the creditor's Traffic Department. Returns for other than defective product will assess a 20% restocking fee; and revocation of any promotions, specials, or other offers redeemed because of original sale.
- Credit Applicant agrees to pay invoices in accordance with the Creditor's terms of sale, which are Net 30 Days from date of invoice unless otherwise specified on the invoice.
- Credit Applicant(s) shall be responsible to pay Creditor a service charge of 1.5% per month (18% per annual) or the highest rate permitted by law, on any unpaid balance due over thirty (30) days.
- Credit Applicant(s) is responsible for all costs of collection including reasonable attorney's fee incurred by creditor in collecting any amounts due it or enforcing its rights.
- Credit Applicant(s) hereby gives a security interest to Creditor in all products purchased from the Creditor (now owned and hereafter acquired) to secure payment of any account balance owed.
- Credit Applicant(s) affirms that all information herein together with all information submitted in connection with this application is true and accurate and that it will promptly notify Creditor if any information changes.
- Credit Applicant(s) agrees to immediately notify Creditor's Traffic Department of all shortages, price discrepancies or freight disputes.
- All new dealers are subject to \$1000 minimum prepaid first order.
- A \$20.00 MINIMUM ORDER FEE will be added to all orders under \$500.00.
- Credit Applicant(s) acknowledge that a service charge of \$30 will be applied to each check returned for insufficient funds.
- I/We give you our personal guarantee. For value received, including merchandise, services, or other valuable consideration, I hereby unconditionally guarantee at all times, full and prompt payment, upon demand, of any indebtedness which has been incurred under this agreement with AOG. I understand this to mean that I will personally guarantee payment of all debts and obligations under this agreement.

AOG reserves the right to discontinue credit at any time without notice if above terms & conditions are not met or at the sole discretion of AOG.

Company Name _____

Print Name and Title _____

Authorized Signature of Officer/Owner _____

Date _____

Social Security Number _____

Phone Number _____