



Columbian Home Products, LLC.
550 N. Rand Road
Lake Zurich, IL 60047
(847) 307-8600 - A/R
(847) 726-7406 - A/R Fax

Divisions of



Application for Credit - Standard Credit Terms - NET 30 Days

Referred by: _____

Name of Firm or Individual

Address

Years in Business

City State Zip Code Phone Fax

Duns # Tax ID #

Hereby applies for credit in accordance with terms and conditions of Columbian Home Products, LLC credit policies. The following information must be provided. It will be held in the strictest confidence.

Corporation Incorporated in last 12 months Limited Liability

Partnership Individual Company

AMOUNT OF CREDIT REQUESTED: _____

ESTIMATED PURCHASES: WEEKLY: _____ ANNUALLY: _____

All orders under \$250.00 are to be prepaid. Businesses in business less than a year will be prepaid for the first six months to establish an acceptable payment history. After the probationary period has expired we will reevaluate the account for terms.

(1)

Name(s) of Principal(s)

(2)

(3)

Credit References (Please fill out with address, contact name including phone number and fax number if available)

(1)

(2)

(3)

We Certify that all the information provided on this form is correct. We fully understand your credit terms and agree to the proper payment in consideration of extended credit.

Signed: _____

Date: _____ Title: _____

If Columbian Home Products, LLC engages the services of an attorney or credit collection agency in the collection of past-due accounts, the payment of reasonable fees attributable thereto shall become an obligation of the Customer of Columbian Home Products, LLC to the extent permitted by law.



Columbian Home Products, LLC.
550 N. Rand Road
Lake Zurich, IL 60047
(847) 307-8600 - A/R Direct
(847) 726-7406 - A/R Fax

Divisions of



**Application for Credit - Standard Credit Terms - NET 30 Days
Release of Information Authorization Form**

Bank / Reference Name _____

Bank Officer / Acct Representative _____

Account Number _____

Title _____

Address _____

Phone _____

Fax _____

E-mail _____

We hereby authorize the release of information from the above reference to Columbian Home Products, LLC and their appointed representatives for credit verification purposes. We understand that Columbian Home Products, LLC will hold all credit reference information in the strictest confidence.

Name of Firm or Individual

Title

Name (Please Print)

Signed Date

| *****Columbian Home Products, LLC USE ONLY***** | | |
|---|--|-----------------------------|
| Credit Limit _____ | Approval Signature - COO _____ | (100K+) Signature Needed |
| Terms _____ | Approval Signature - CFO _____ | |
| Account # _____ | Approval Signature - A/R Manager _____ | |



Columbian Home Products, LLC.
550 N. Rand Road
Lake Zurich, IL 60047
(847) 307-8600 - A/R Direct
(847) 726-7406 - A/R Fax

Divisions of



**MULTI-STATE SALES TAX EXEMPTION AND RESELLER CERTIFICATE
ANY MODIFICATION TO THIS CERTIFICATE RENDERS IT NULL AND VOID**

Vendor: Columbian Home Products, Joyce Chen Products, Snow River Products & Keilen LTD.

Address: 550 N. Rand Road

City: Lake Zurich State: Illinois Zip Code: 60047-3103

Purchaser: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Is registered and/or identified with the below listed cities and/or states within which your firm would deliver purchases to us and that any such purchases are for wholesale, resale, ingredients or components of a new product to be resold, leased, rented or used in the normal course of our business. We are in the business of wholesaling, retailing, manufacturing, leasing (renting) the following:

General Description of the Business _____

General Description of products to be purchased from seller: _____

Effective Date: _____ Expiration Date: _____

List Registration, Identification, Direct Payment Permit # or Exemption # for each state the form applies:

Number#: _____ State: _____

I further certify that if any property so purchased tax free is used or consumed by the firm as to make it subject to a sales or use tax we will pay the tax due direct to the proper taxing authority when state law so provides or inform the seller for added tax billing. This certificate shall be part of each order which we may hereafter give to you, unless otherwise specified, and shall be valid until cancelled by us in writing or revoked by the city or state.

Under penalties of perjury, I swear or affirm that the information on this form is true and correct as to every material matter.

Purchaser's Authorized Signature (Owner, Partner, or Corporate Officer)

Title

Date

NOTE: You must send a current copy of your certificate with this application