



Ph: 800-233-7009
Fx: 717-964-2207

Dear Valued Customer,

Thank you for your interest in doing business with DAS Companies, Inc.

In order to process your credit application efficiently, please include complete addresses, phone numbers, fax numbers, and be sure to sign and date the application.

If this information is not provided, your credit application may not be processed in a timely manner.

Please fax your completed application to 717-964-3710, attn: Barb Lentz.

Thank you for your cooperation.

Sincerely,

A handwritten signature in blue ink, appearing to read "Barb Lentz", is positioned above the typed name.

Barbara Lentz
Credit Manager
DAS Companies, Inc.
800-233-7009 ext. 255

Corporate Office
724 Lawn Road
Palmyra, PA 17078
www.dasinc.com



CREDIT APPLICATION

FAX YOUR COMPLETED APPLICATION TO 717-964-3710, ATTN: BARB LENTZ

Please complete all applicable information. If additional space is required attach another sheet.

Business Contact Information

Last:	First:	M/I:	Title
Legal Name of Business:			Tax I.D. Number
Fictitious/Other Business Names:			DUNS Number
Address:			
City:	State:	ZIP:	Phone:
Fax:	Email:		

Business Information

Type of Business:	In Business Since:
Legal Form Under Which Business Operates:	
Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Corporation <input type="checkbox"/> Other <input type="checkbox"/>	
If Division/Subsidiary, Name of Parent Company:	In Business Since:
Name of Company Principal Responsible for Business Transactions:	Title:
Address:	City: State: ZIP: Phone:
<i>If DAS determines to provide credit, credit will be extended based on open terms.</i>	
Desired Credit Limit: \$ _____	

Bank References

Institution Name:	Institution Name:	
Account Numbers:	Existing Loan:	Loan Balance:
Address:	Address:	
Phone and Fax:	Phone and Fax:	



CREDIT APPLICATION

Trade References

Company Name:	Company Name:	Company Name:	Company Name:
Contact Name:	Contact Name:	Contact Name:	Contact Name:
Address:	Address:	Address:	Address:
Phone:	Phone:	Phone:	Phone:
Fax:	Fax:	Fax:	Fax:
Account Opened Since:	Account Opened Since:	Account Opened Since:	Account Opened Since:
Credit Limit:	Credit Limit:	Credit Limit:	Credit Limit:
Current Balance:	Current Balance:	Current Balance:	Current Balance:

Are Financial Statements Available? Yes No Are they audited? Yes No DAS reserves the right to request financial statements at any time both in the initial examination of the credit application and at any time that DAS determines, in its sole discretion, it requires financial statements.

I hereby certify that the information contained herein is complete and accurate and that the individual signing this application is authorized to do so on behalf of the applicant. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of credit to be extended. Furthermore, I hereby authorize the financial institutions and vendor references listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein. Further, by signing this application I agree to the DAS terms and conditions for credit as set forth below.

Signature of Authorized Signer *Print Name/Title* *Date*

- Terms and Conditions:**
- All invoices are required to be paid within the terms set out in your agreement(s) with DAS or as notified by DAS and as agreed from time to time with DAS. In the absence of agreed terms or a notification by DAS, all invoices are net 20 days. In the event you reasonably dispute an invoice or a portion of an invoice, you will pay all other invoices or the undisputed portion of a single invoice in a timely manner.
 - If you fail to pay an invoice when due, then you agree to pay DAS a finance charge of 1.5% per month, 18% per year or the amount permitted under applicable law, whichever is less. You will be charged a fee of \$30.00 for any dishonored or returned check.
 - You agree that in event of a default in payment, you shall pay all applicable collection costs and all reasonable attorney fees incurred by DAS in collecting the debt. You authorize release of the credit information and your company information to any attorney or organization that is assisting DAS in the collection of any amounts due to DAS.
 - DAS reserves the right to restrict, deny or withdraw credit at any time based on its reasonable assessment of credit risk. Without limiting the foregoing, DAS may immediately suspend credit due to delinquency in payment or due to insolvency, bankruptcy, change in ownership of your organization or other event that may affect applicant's ability to pay all amounts when due.
 - You are required to inform DAS of any changed circumstances that would alter its decision to extend credit.
 - By setting up this account you certify that you are a registered reseller in each state and country where you are conducting business. You agree to provide a valid sales & use tax certificate (or country equivalent) and that any sales, use, VAT or GST owed will be paid and/or deposited by you.
 - You acknowledge receipt of and to agree to abide by DAS's returns policy which may be modified from time to time at the sole discretion of DAS.
 - You acknowledge and agree that this Credit Application and the information contained may be shared among all of the DAS Companies, Inc. affiliated companies.

UNIFORM SALES & USE TAX CERTIFICATE—MULTIJURISDICTION

The below-listed states have indicated that this form of certificate is acceptable, subject to the notes on pages 2-4. The issuer and the recipient have the responsibility of determining the proper use of this certificate under applicable laws in each state, as these may change from time to time.

Issued to Seller: DAS Companies Inc.

Address: 724 Lawn Road Palmyra Pa 17078

I certify that:
 Name of Firm (Buyer): _____
 Address: _____

- is engaged as a registered
- Wholesaler
 - Retailer
 - Manufacturer
 - Seller (California)
 - Lessor (see notes on pages 2-4)
 - Other (Specify) _____

and is registered with the below listed states and cities 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 or service¹ to be resold, leased, or rented in the normal course of business. We are in the business of wholesaling, retailing, manufacturing, leasing (renting) the following:

Description of Business: _____

General description of tangible property or taxable services to be purchased from the seller: _____

State	State Registration, Seller's Permit, or ID Number of Purchaser	State	State Registration, Seller's Permit, or ID Number of Purchaser
AL ¹	_____	MO ¹⁶	_____
AR	_____	NE ¹⁷	_____
AZ ²	_____	NV	_____
CA ³	_____	NJ	_____
CO ⁴	_____	NM ^{4,18}	_____
CT ⁵	_____	NC ¹⁹	_____
DC ⁶	_____	ND	_____
FL ⁷	_____	OH ²⁰	_____
GA ⁸	_____	OK ²¹	_____
HI ^{4,9}	_____	PA ²²	_____
ID	_____	RI ²³	_____
IL ^{4,10}	_____	SC	_____
IA	_____	SD ²⁴	_____
KS	_____	TN	_____
KY ¹¹	_____	TX ²⁵	_____
ME ¹²	_____	UT	_____
MD ¹³	_____	VT	_____
MI ¹⁴	_____	WA ²⁶	_____
MN ¹⁵	_____	WI ²⁷	_____

I further certify that if any property or service 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 directly to the proper taxing authority when state law so provides or inform the seller for added tax billing. This certificate shall be a part of each order which we may hereafter give to you, unless otherwise specified, and shall be valid until canceled 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.

Authorized Signature: _____
 (Owner, Partner or Corporate Officer)

Title: _____

Date: _____