



# DEALER APPLICATION FORM

101 Main Street – Superior, WI 54880  
 PH: 800.282.4868 FAX: 715.395.9959  
[www.feradyne.com](http://www.feradyne.com)

BUSINESS	BUSINESS NAME			ACCOUNT NUMBER <small>OFFICE USE ONLY</small>	
	BILLING ADDRESS (STREET)		(CITY)	(STATE)	(ZIP)
	PHONE	FAX	E-MAIL		
	SHIPPING ADDRESS (if different from above)				
	HOURS OF OPERATION / DELIVERY HOURS			LIFTGATE NEEDED (check one) <input type="checkbox"/> Yes <input type="checkbox"/> No	
	YEARS IN BUSINESS	NO. OF EMPLOYEES	TYPE OF OWNERSHIP (check one) <input type="checkbox"/> LLC <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation		
	ACCOUNT TYPE (check one) <input type="checkbox"/> Credit Card/Wire/Prepaid <input type="checkbox"/> Net 30 Days		TRADE ORGANIZATION MEMBERSHIP(S)		MEMBERSHIP NUMBER(S)
OWNERSHIP	NAME 1		TITLE	DAYTIME PHONE	
	HOME ADDRESS (STREET)		(CITY)	(STATE)	(ZIP)
	NAME 2		TITLE	DAYTIME PHONE	
	HOME ADDRESS (STREET)		(CITY)	(STATE)	(ZIP)
SUPPLIERS	COMPANY NAME		ACCOUNT NO.	PHONE NO.	FAX NO.
BANK	BANK NAME		ACCOUNT NO.	ACCT. TYPE	
				<input type="checkbox"/> Ckg. <input type="checkbox"/> Loan	
			<input type="checkbox"/> Ckg. <input type="checkbox"/> Loan		

***PERSONAL GUARANTEE – MUST BE SIGNED IF TERMS ARE DESIRED***

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. I understand this to mean that I will personally guarantee payment of all debts, obligations and collections costs under this agreement. All checks returned for Not Sufficient Funds (NSF) will be charged a \$30.00 fee.

DATE SIGNED BY PRINT NAME

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DATE SIGNED BY PRINT NAME

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***PLEASE READ AND SIGN THE FOLLOWING STATEMENT AFTER YOU HAVE COMPLETED APPLICABLE SECTIONS ABOVE***

You are authorized to contact parties indicated on this application for verification. For purposes of obtaining credit, I/we certify that the information given on this application is true and accurate, and any financial information submitted correctly reflects our financial condition. I/we agree to pay all invoices within stated terms and to pay service charges on amounts paid after invoice due dates at a rate of 1.5% per month, or the maximum allowable rate, whichever is less. In the even a suit is instituted to collect amounts owing to you and a judgement is rendered in your favor, I/we agree to pay court costs, collections costs, and reasonable attorney fees. I/we have read this agreement and a copy has been made available to me/us or is available upon request from the credit department.

DATE SIGNED BY PRINT NAME

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DATE SIGNED BY PRINT NAME

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# Oregon Business Registry Resale Certificate

Oregon doesn't impose a general sale/use/transaction tax. An Oregon buyer who purchases goods outside Oregon for resale in the ordinary course of business may provide this certificate to an out-of-state seller of property as evidence that the buyer is registered to do business in Oregon.

The seller may accept this certificate as a substitute "resale certificate" for purposes of exempting the transaction from that state's sales/use/transaction tax, but isn't required to do so.

## A. Purchaser information

Purchaser/business name	Oregon Business Registry number*
Purchaser/business address	Telephone
This business' only physical location is in Oregon. <input type="checkbox"/> Yes <input type="checkbox"/> No	
This business is engaged in selling the following type of tangible property:	

\*To verify the business registration, visit [www.oregon.gov/SOS](http://www.oregon.gov/SOS) > Corporation > Business Registration Services > Business Name Search.

## B. Personal property information

Description of personal property to be purchased for resale:
archery accessories, equipment & supplies as purchased from:
FeraDyne Outdoors, LLC
101 Main Street
Superior, WI 54880

I hereby certify that, in the regular course of my business operations, I will resell the item(s) listed in Part B above, which I am purchasing under this resale certificate in the form of tangible personal property. I will resell the item(s) making any use of the item(s) other than demonstration and display while holding the item(s) for sale in the regular course of my business. I understand that if I use the item(s) purchased under this certificate in any manner other than as described, I may owe use tax based on each item's purchase price or as otherwise provided by law.

Name of person signing for business

Title

Signature of person signing for business

Date