



**Los Angeles, CA**  
 770 S. Epperson Dr.  
 City of Industry, CA 91748  
 (626) 839-8866  
 (800) 879-9512  
 (626) 839-8861 Fax

# New Customer Application

**Legal Entity:**

- Sole Proprietor
- Corporation
- Partnership
- Limit Liabilities Company (L.L.C.)
- Other \_\_\_\_\_

**Business Operated From:**

- Retail Store Front
- In-Home Business
- Industrial Center
- eCommerce

**HT OFFICE USE ONLY**

Acct #:
Terr #:
Approval:

Estimated Monthly Purchases: \$ \_\_\_\_\_ # Locations: \_\_\_\_\_ # Employees: \_\_\_\_\_

**General Information**

Legal Name _____	Phone _____
Trade Name (DBA) _____	Fax _____
Address _____	Website _____
City, State, Zip _____	E-Mail _____
Years in Business _____	Fed.ID _____

**Personal Information of President, Owner, CEO, Partners**

Name & Title _____	Name & Title _____
Home Address _____	Home Address _____
City, State, Zip _____	City, State, Zip _____
Cell/E-mail _____	Cell/E-mail _____
Social Security _____	Social Security _____

**Bank References**

Name _____	Name _____
Address _____	Address _____
City, State, Zip _____	City, State, Zip _____
Account No. _____	Account No. _____
Phone _____	Phone _____
Fax/E-Mail _____	Fax/E-Mail _____

The undersigned hereby authorize HT window fashions™ to review any information provided for the purpose of establishing credit. It is agreed that the undersigned will hold harmless the companies engaging in the exchange of such information and understands that the information provided is used for credit worthiness as a routine business practice. I also authorize release of my credit information to a credit service agency for the purpose of establishing an account with HT window fashions™.

\_\_\_\_\_  
 Authorized Signature

\_\_\_\_\_  
 Company Name

\_\_\_\_\_  
 Print Name

\_\_\_\_\_  
 Date

**IMPORTANT! Application Cannot Be Processed Without Customer Signature**

## Trade References

Name	_____
Address	_____
City, State, Zip	_____
Account No.	_____
Phone	_____
Fax/Email	_____

Name	_____
Address	_____
City, State, Zip	_____
Account No.	_____
Phone	_____
Fax/Email	_____

Name	_____
Address	_____
City, State, Zip	_____
Account No.	_____
Phone	_____
Fax/Email	_____

Name	_____
Address	_____
City, State, Zip	_____
Account No.	_____
Phone	_____
Fax/Email	_____

## Requested Terms

Net 30 Day Terms

Credit Card

Cash / Check

By: \_\_\_\_\_

Requested Terms - Authorized Signature

(Print Name)

Date

### Personal Guarantee - Net 30 Day Terms

The undersigned, in consideration of you extending credit at my request to \_\_\_\_\_ (hereinafter referred to as the "Company") hereby personally guarantee to you payment of any obligation of the Company and I hereby bind myself to pay you on demand any sum which may become due to you by the company whenever the Company shall fail to pay the same. It is understood that this guaranty shall be a continuing and irrevocable guarantee and identity for such indebtedness of the company. I do hereby waive notice of default, non-payment and extension of credit. The undersigned guarantor agrees to pay, in the event the amount becomes delinquent and is turned over to any attorney for collection, attorney's fee and all attendant collection costs. It is understood that this guaranty may be enforced without first having to sue the corporation of business which has incurred the debt. For purposes of the guaranty it is agreed that I will be responsible for the corporate or business debt even though my name does not appear on the invoices or billings.

By: \_\_\_\_\_

Authorized Signature

(Print Name)

Date

[WWW.HTWFONLINE.COM](http://WWW.HTWFONLINE.COM)

# Purchase Agreement

<b>TERMS</b>	Due and payable in full within established time from date of invoice unless otherwise agreed upon in writing.
<b>LATE PAYMENT</b>	Past due amounts are subject to late payment service charges of 1.5% per month, HT reserves the rights to hold customer orders, switch payment terms, submit delinquent account history and information to industry credit agencies, and pursuit legal actions.
<b>NSF CHECKS</b>	A service charge of \$30 will be applied to each returned check.
<b>RETURNS</b>	No returned goods will be accepted without authorization and freight charges must be prepaid by customer. HT does not accept returns other than stock blinds. HT only accepts stock blinds returns when all the following conditions are present: Merchandise (s) with un-opened boxes and not cut downs; HT must receive the return merchandise (s) within 14 days from the invoice date. Note: All returns are subject to a 20% restocking fee.
<b>FREIGHT DAMAGE CLAIMS</b>	Customer assumes full responsibility of all goods when goods are received and signed for by Customer or Agent ( <b>including any obvious or hidden freight damage if Supplier is not notified within 48 hours</b> ).
<b>TITLE</b>	Title to any and all goods or materials hereafter purchased shall remain with Supplier until the full purchase price has been paid.
<b>FAILURE TO PAY OR INSOLVENCY</b>	Failure by customer to pay any part of the purchase price when due, or in the event that proceeding in bankruptcy, receivership, or insolvency are instituted by or against Customer or his property, supplier may, at its option, cause the entire unpaid balance to become due and immediately payable, and supplier shall have the right to enter at anytime without notice upon the premises where any of the materials purchased by Customer are located. Customer hereby expressly waives any right to action which may occur by reason on the entry for taking possession of or the selling of said materials and agrees to pay all costs incurred with respect thereto including service charges, all 3rd party collection fees, finance charges, reasonable attorney's fees and court costs.
<b>ENTIRE AGREEMENT</b>	This Agreement covers all materials which Customer may hereafter acquire at any time from Supplier. This contract constitutes the entire Agreement with Supplier. No waivers or modifications shall be valid unless the same are in writing and executed by both parties hereto. This contract shall apply and accrue to the benefit of, and be binding upon, the heirs, executors, administrators, successors, and assigns of the respective parties. This Agreement applies to all invoices involving labor, product or services rendered by Tehdex Corp.
<b>LITIGATION</b>	In the event of any litigation arising out of this agreement, Supplier shall be entitled to its reasonable costs and expenses incurred including attorney's fees.
<b>STATE LAWS</b>	This Purchase Agreement shall be governed by the laws of the States of California.
<b>RECEIPT OF A COPY</b>	Customer hereby acknowledges the receipt of a copy of this Agreement at the time of its execution.

By: \_\_\_\_\_ Company Name: \_\_\_\_\_  
(signature)

Position: \_\_\_\_\_ Date Accepted: \_\_\_\_\_

# Resale Certificate

Please complete and return form with a copy of your original seller's permit. **All accounts without completed forms will be charged sales tax.**

\_\_\_\_\_  
Name of Purchaser

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

I hereby certify that: I hold valid sellers permit No. \_\_\_\_\_ issued pursuant to the Sales and Use Tax Law; that I am engaged in the business of selling \_\_\_\_\_; That the tangible personal property described herein which I shall purchase from HT Window Fashions will be resold by me in the form of tangible personal property provided, however, that in the event of any such property is used for any purpose other than retention, demonstration, or display while holding it for such sale in the regular course of business, it is understood that I am required by Sales and Use Tax Law to report and pay tax, measured by the purchase price of such property.

Description of property to be purchased; \_\_\_\_\_

By: \_\_\_\_\_ Print Name: \_\_\_\_\_  
(signature of purchaser or agent)

As: \_\_\_\_\_ Date Accepted: \_\_\_\_\_  
(position/title)

Phone Number: \_\_\_\_\_



Thank you for giving us the opportunity to service your wholesale custom window covering needs. We know you have many choices when it comes to selecting a fabrication source and we will do our best to provide the highest level of quality products and services at the industry's most competitive wholesale prices. We appreciate your taking the time to complete our Customer Application Form in its entirety and we look forward to manufacturing your custom orders.

**HT Window Fashions Management**

## Thank You

[WWW.HTWFONLINE.COM](http://WWW.HTWFONLINE.COM)

## CREDIT CARD AUTHORIZATION FORM

Authorization Form Instructions:

\*Please Type "Yes" - authorize or "No" - not authorize  
(If Yes - continue and sign this form below / If No - stop here)

**Contact HT Window Fashions Credit Department with any Question**

Credit Card Type:  Visa  Master Card  American Express\*

\*Note: Due to higher merchant fees, payments made using the AMEX card will incur an added 1.5% processing fee.

Name on the Card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration Date: MM/YEAR \_\_\_\_\_ / \_\_\_\_\_

AVS: (card security code) \_\_\_\_\_ For Visa, MasterCard card security code is a 3 digit code printed on the signature strip on the back of the credit card. For American Express, the code is a 4-digit number on the front of the card above the account number.

Person other than card owner authorized to approve credit card payment:

\_\_\_\_\_  
\_\_\_\_\_

### Credit Card Billing Address:

Street: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Daytime Telephone Number: \_\_\_\_\_

Evening Telephone Number: \_\_\_\_\_

authorize HT Window Fashions Corporation to charge my credit card:

\_\_\_\_\_  
Cardholder's Signature

\_\_\_\_\_  
Date

**I authorize Credit Manager to change my terms to Credit Card.  
Orders will automatically be charged to Credit Card.**

Yes  No

Please note: A 1.5% transaction fee will apply to all payments applied to past due balances