



P.O. BOX 648

BRACKETTVILLE, TEXAS 78832
1-800-687-7624 FAX 830-563-3236

DEALER APPLICATION

BUSINESS INFORMATION

LEGAL BUSINESS NAME: YEARS IN BUSINESS:

BILLING ADDRESS: SHIPPING ADDRESS:

CITY: STATE: ZIP: EMAIL:

PHONE # FAX #

RETAIL TAX NUMBER ** PLEASE PROVIDE A COPY OF RETAIL MERCHANT CERTIFICATE

OWNER/PRINCIPAL NAME: SOCIAL SECURITY#:

AUTHORIZED BUYERS ACCOUNTS PAYABLE:

NATURE OF BUSINESS:

RESALE AT WHOLESALE OR RETAIL STORE FRONT MOBILE

AVERAGE # OF SADDLES ON FLOOR WALL SPACE FOR TACK FT

INTERNET (on-line store) WEB ADDRESS: ACTIVE SINCE:

TYPE OF PAYMENT PREFERRED: PLEASE CHECK ONE

NET 30 DAYS C.O.D. - company check or money order only VISA MASTER CARD AMERICAN EXPRESS

CREDIT CARD# EXPIRATION DATE:

CARDHOLDER:

BANK & TRADE REFERENCES minimum of 2 if requesting cod or credit card; must have 3 for open account

- 1) COMPANY: PHONE #
2) COMPANY: PHONE#
3) COMPANY: PHONE#

AGREEMENT: Please read carefully, sign and date.

In exchange and consideration for goods and merchandise sold to me by ALAMO SADDLERY L.L.C., I agree to the following conditions and terms.

I agree to pay the full amount of purchases within ALAMO SADDLERY STANDARD TERMS OF NET 30 days from date of shipment by ALAMO SADDLERY.

I understand that a FINANCE CHARGE OF 1-1/2% per month (18% per annum) will be added starting the 31st day following the date of each invoice if the invoice is not paid by me.

I agree to allow ALAMO SADDLERY to contact my trade references in determining dealership and/or an appropriate line of credit.

In exchange for ALAMO SADDLERY extending credit to me, for all goods and merchandise invoiced by ALAMO SADDLERY after this date, either at my request or my agents, I hereby personally guarantee unconditionally and irrevocably the prompt and immediate payment of any outstanding amount owed to ALAMO SADDLERY L.L.C., at its offices located at P.O. Box 648, 200 RR 693, Brackettville, TX 78832, for the sale or delivery of goods and merchandise whether these amounts are or will be due to ALAMO SADDLERY under open account, contract, or otherwise.

I understand and agree that all invoices and statements will be sent by US Mail to the billing address provided. The undersigned guarantor further waives demand, notices of default, and any extension of time for payment to ALAMO SADDLERY.

AUTHORIZED SIGNATURE: DATE