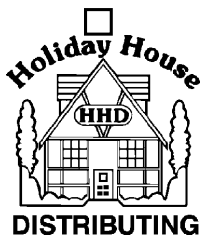


I am applying for:



P: 1-800-443-4318



New Request

Update Existing

### NEW ACCOUNT & CREDIT APPLICATION

**BILL TO:**

Legal Company Name: \_\_\_\_\_

D.B.A.: \_\_\_\_\_

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

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**SHIP TO: (If different from Bill To)**

Legal Company Name: \_\_\_\_\_

D.B.A.: \_\_\_\_\_

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

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

How would you like to receive invoices? (Choose 1)  Email  Fax (Email/Fax#) \_\_\_\_\_

Nature of Business: \_\_\_\_\_ Year Established: \_\_\_\_\_ Type:  Corporation  Partnership  Sole Proprietorship

Do you need a catalog?  Yes  No How did you hear about us? \_\_\_\_\_

### **\*MUST COMPLETE CONTACT INFORMATION\***

Owner: \_\_\_\_\_ SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Federal ID#: \_\_\_\_\_

**Sales Contact:** \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Receive Our Email Announcements:  Yes  No

**Service Contact:** \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Receive Our Email Announcements:  Yes  No

**A/P Contact:** \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Receive Our Email Announcements:  Yes  No

### **\*\*\*TRADE CREDIT REFERENCES\*\*\***

If requesting credit terms please attach 4 credit references complete with phone and fax numbers. Floor plan companies, credit card, additional bank references and personal references are NOT acceptable.

### **CREDIT CARD PAYMENTS: (COMPLETE CREDIT CARD AUTHORIZATION FORM!)**

Charge my account all orders  Charge my account until my credit is approved

### **SALES TAX**

Other than for sales to locations in Florida, Holiday House Distributing Inc., KoolTek LLC and BrewTek LLC are not responsible for and do not collect any sales or use tax, therefore, you must remit any sales or use tax due on any transaction to the appropriate state. Holiday House Distributing Inc., KoolTek LLC and BrewTek LLC require all customers to have a current resale certificate on file. See sales tax form. If Holiday House Distributing Inc., KoolTek LLC and BrewTek LLC are later assessed tax by a state other than Florida as a result of your failure to remit the entire tax due, you agree to reimburse Holiday House Distributing Inc., KoolTek LLC and BrewTek LLC for all tax, interest and penalties assessed along with any attorney fees with respect to all transactions.

I HEREBY AFFIRM THAT THE ABOVE INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE. I AGREE TO PAY ALL BILLS WHEN DUE INCLUDING REASONABLE SERVICE CHARGES AND ATTORNEY FEES IF COLLECTION ACTION IS REQUIRED. I UNDERSTAND AND AGREE TO ABIDE BY THE CREDIT TERMS FOR HOLIDAY HOUSE DISTRIBUTING INC., KOOLTEK LLC AND BREWTEK LLC .

**X** Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Fax To: 800-863-7041**



P: 1-877-Kool-Tek  
F: 1-813-298-1993  
E: info@KoolTekCoolers.com  
W: www.KoolTekCoolers.com

# Credit Card Authorization Form

Dear Valued Customer,

Please fill out the following form and return it with your signature so that we may process your order. I authorize Kool Tek, LLC to charge my:

Visa: \_\_\_\_\_ MasterCard: \_\_\_\_\_ American Express: \_\_\_\_\_

Card#: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Validation Code: \_\_\_\_\_

(For VISA and MC it is the last 3 digits on the back of the card, for AMEX it is 4 digits on the front of the card )

Cardholders' Name: \_\_\_\_\_

## ***Credit Card Billing Information***

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

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

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

## **READ THE FOLLOWING THOROUGHLY**

**I understand that my signature on this form will serve in lieu of my authorized signature on the credit slip. I understand that once my order has been processed and shipped, I may not cancel my order. If I refuse my order once it has shipped, I agree to be responsible for all shipping charges both ways.**

I understand that to cancel *Automatic Charge* to my credit card, I can simply call Kool Tek and let them know. This signature guarantees all on-going credit card charges until cancelled. I understand that there are no refunds or returns on special orders.

I have read and understand the above conditions. The above information provided to Kool Tek for charge purposes shall be held in strict confidence.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

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

Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_

