

CUSTOMER APPLICATION

CREDIT APPROVAL PROCESS: PLEASE COMPLETE THIS FORM IN ITS ENTIRETY AND INCLUDE AN AUTHORIZED SIGNATURE AND DATE. FOR IMMEDIATE RELEASE OF YOUR ORDER, YOU MAY OPT TO PREPAY BY CREDIT CARD FOR THE FULL AMOUNT OF THE PURCHASE ORDER PLUS ANY APPLICABLE FREIGHT CHARGES. IF APPLYING FOR CREDIT, PLEASE ALLOW 2 TO 4 WEEKS FOR SHIPPING OF ORDERS FOR ALL NEW ACCOUNTS. ALL ORDERS ARE PREPAY UNTIL CREDIT IS APPROVED.

CREDIT CARD ONLY PURCHASE: PLEASE COMPLETE THE FIRST FOUR SECTIONS ONLY AND INCLUDE AN AUTHORIZED SIGNATURE AND DATE. A PLAY VISIONS REPRESENTATIVE WILL CONTACT YOU FOR YOUR CREDIT CARD INFORMATION. THANK YOU FOR YOUR INTEREST IN PLAY VISIONS.

PLEASE CALL OR EMAIL US IF YOU HAVE ANY QUESTIONS. 1-800-678-8697 / ELIZABETHM@PLAYVISIONS.COM OR BAILEYE@PLAYVISIONS.COM

GENERAL INFORMATION						
BUSINESS NAME:		DBA:				
Street Address:						
City, State, ZIP Code:		Pho	ne:	Fax:		
SHIP TO:						
Street Address:		City, State, ZIP Code:				
Buyer Name:		Buyer Email Address:				
Special Shipping Instructions:						
ACCOUNTS PAYABLE & CONTACT INFORMATION						
A/P EMAIL:			Federal TAX ID #:			
A/P Contact:	Phone:			Fax:		
Date Established:	# of Employees:			Annual Sales:		
	TYPE OF	BUS	SINESS			
□ Toy Store □ *E-Commerce □ Gift Store □ Pharmacy □ Museum Store □ Zoo □ Aquarium □ Educational Supply						
*AMAZON POLICY: Play Visions has one Amazon partner who manages our Amazon sales and brand image. No items distributed by Play Visions can be listed or sold on Amazon. Please fill out info below if you have your own Website.						
*Website/URL:			*DBA:	PBA:		
□ Other (Please Specify):		How did you hear about us?				
PRINCIPAL INFORMATION						
Principal Name:			Phone:			
Home Address:		City, State, ZIP Code:				
Classification: □ Individual □ Sole Proprietor □ Partnership			SSN for Sala Proprietor or Partnership			
LLC LLP Other			SSN for Sole Proprietor or Partnership:			
Are you currently a party to litigation? □ Yes □ No	Do you guarantee the obligations of another business?			Are you willing to personally guarantee this account? $\ \ \Box \ Yes \ \ \Box \ No$		
BANK REFERENCES – ONLY FILL OUT IF APPLYING FOR CREDIT						
Bank Name:			Account #:			
Contact Name:		Phone:				
TRADE REFERENCES — ONLY FILL OUT IF APPLYING FOR CREDIT						
Company Name:			Company Name:			
Address:		Address:				
City, State, ZIP Code:		City, State, ZIP Code:				
Phone: Fax:		Pho	Phone: Fax:			
Email: Acct#			ail:	Acct#:		
Company Name:		Con	Company Name:			
Address:		Address:				
City, State, ZIP Code:		City	City, State, ZIP Code:			
Phone: Fax:	<u>x</u> :		ne:	<u>Fax</u> :		
Email: Acct#		<u>Em</u>	<u>ail</u> :	Acct#:		
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I hereby certify that all merchandise purchased from Play Visions will be for resale in the regular course of business. By signing below, you acknowledge that no items distributed by Play Visions will be listed or sold on Amazon. Applicant further agrees to abide by all terms and conditions of sale, which include: Payment in full according to the stated terms on the invoice and to pay and reimburse Play Visions for all costs and expenses of collection, including reasonable attorneys' fees and expenses incurred in connection with collection of any indebtedness owed to Play Visions whether or not a lawsuit is filed. I agree that a late charge of 1.5% per month (18% annually) will be assessed to all outstanding balances. Additionally, I hereby authorize the references listed above to divulge any pertinent information regarding the credit status of this

business to Play Visions. I understand that all information is held in the strictest of confidence and used solely for credit consideration purposes. The undersigned agrees to provide the creditor, upon request, with an updated and signed application and/or updated financial information. If the applicant is not a corporation the creditor is authorized to obtain credit reports on all the proprietors, owners or partners. No terms or conditions different from or in addition to the terms of the creditor, including freight terms and discounts, will become part of any sales agreement, purchase order, or other document unless specifically approved in writing by the creditor. The creditor may terminate any credit availability or sale within its sole discretion.					
Signature:	Title:	Date:			