

## **HIDA TOOL & HARDWARE CO., INC.**

1333 San Pablo Avenue  
Berkeley, CA 94702  
TEL (510) 524-3700 FAX (510) 524-3423  
[hidatool@hidatool.com](mailto:hidatool@hidatool.com)  
[www.hidatool.com](http://www.hidatool.com)

### **WHOLESALE ACCOUNT OPENING TERMS & AGREEMENT**

#### **PAYMENT TERMS:**

Payment for the initial purchase order for an approved account must be made with one of the following methods:

- Cash in United States dollars
- Check (must be cleared prior to shipping)

\*A foreign check may require an additional fee.

For accounts approved of open account terms:

Net 30 days **from date of shipment recorded on the invoice**

All payments must be remitted to Hida Tool & Hardware Co., Inc. within 30 days from due date recorded on the invoice for items ordered by the purchaser or all buyers on the purchaser's behalf.

A late payment charge of 1.5% per month (18% in total per year) will be added on unpaid balance of all past due accounts.

If an invoice becomes past due, all future shipments and purchase orders will be halted until the past due invoice is fully paid and cleared.

#### **OPEN ACCOUNTS:**

Credit approval by our credit department is required for open account terms.

Please submit the **Wholesale account application form** and provide **three credit references** before placing the initial order. (Please see attached forms)

At least two companies out of the three referred companies must respond and fill out our credit reference forms for the open account terms to be approved.

\*If a credit card will be used for every purchase order, the credit references section does not need to be filled out.

**Please submit the copy of SELLER'S PERMIT issued by the state along with the application forms.**

#### **SHIPPING CHARGES:**

We will charge a shipping fee based on UPS rate or any freight rate.

**MINIMUM ORDER:** None

#### **PRICES:**

All prices are in U.S. currency with no local or Federal taxes included. All prices are subject to change without notice.

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**WHOLESALE ACCOUNT APPLICATION FORM**

**APPLICANT INFORMATION**

Full Company Legal Name:

Billing Address:

City:

State:

Zip Code:

Ship to Address:

City:

State:

Zip Code:

Contact Name:

E-mail:

Telephone:

Fax:

Date Established:

Type of Business:

CORP: LTD: PLC: Partnership: Sole Trader/Proprietor: LLC: Other:

Resale Permit#

EIN#(Federal Tax ID#)

Estimated Annual Sales: \$

**ACCOUNTS PAYABLE CONTACT INFORMATION**

\*Must list at least 3 contact methods including telephone or e-mail

Accounts Payable Contact Name:

Telephone:

E-mail:

Fax:

Mail:

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**WHOLESALE ACCOUNT APPLICATION FORM**

**BANK / FINANCE INFORMATION**

Bank Name:		Date Account Opened:
Address:		Contact:
City:	State:	Zip Code:
Telephone:	Fax:	
Checking Account#	Saving Account#	
Average Acct. Balance: \$	Bank Line of Credit: \$	

**CREDIT REFERENCE 1 (MUST LIST 3 REFERENCES TO FILE FOR OPEN ACCOUNT TERMS)**

\*Please enter the most current Fax and E-mail that can receive the credit reference forms to fill out.

Company Name:		
Address:		
City:	State:	Zip Code:
Contact Name:		
Telephone:	*Fax:	*E-mail:

**CREDIT REFERENCE 2**

Company Name:		
Address:		
City:	State:	Zip Code:
Contact Name:		
Telephone:	*Fax:	*E-mail:

**CREDIT REFERENCE 3**

Company Name:		
Address:		
City:	State:	Zip Code:
Contact Name:		
Telephone:	*Fax:	*E-mail:

**PLEASE SIGN BELOW**

I certify that the information above is true and correct, and that I can and will comply with the terms and conditions of such credit as you extend. If the wholesale account is under open account terms, I understand that we are responsible for remitting payment to Hida Tool & Hardware Co., Inc. within 30 days from invoice date for items ordered by us or all buyers on our behalf.

Signature of Applicant:	Date:
Printed Name:	Position: