

**Required fields*

Date: 3/12/2018

GENERAL ACCOUNT DETAILS

<p>*Billing Name and Address</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>City _____</p> <p>State _____ Postal Code _____</p> <p>Tel# _____</p> <p>Email _____</p> <p>Contact Name _____</p>	<p>*Shipping Name and Address</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>City _____</p> <p>State _____ Postal Code _____</p> <p>Tel# _____</p> <p>Email _____</p> <p>Contact Name _____</p>
<p>*Type of Business: Book Store <input type="checkbox"/> Gift Store <input type="checkbox"/> Other: {please specify} _____</p>	

For Sales Rep Use Only

Please select account type:* **Returnable **Non-returnable**

**Account Type:* _____ **Market Channel:* _____ **Sales Rep Code:* _____

**Discount: {please specify}* _____ **Freight terms: {ex. free freight, collect}* _____

**Sales Rep Name/Email/Phone* _____

continued on next page

*Payment Terms

Credit References

Credit references sent to HBG:
Yes No

OR

Pre-Payment

Payment will be made in full prior to order shipment:
Yes No

Please note: One banking and three trade references are required to establish NET 30 day terms. These references can be provided on the credit application on page 4.

If account wishes to prepay for their orders - **VISA, MasterCard, and American Express** are accepted. Bank checks or wire transfers are also acceptable methods of payment. Bank details available upon request.

Please be advised there is a total combined maximum monthly allowable amount of \$5,000 which can be processed on your credit card(s).

*Sales Tax Exemption

Is the account tax exempt: Yes, reseller Yes, other No

If you are tax exempt, a copy of your exemption certificate is required!

Please fill out and return applicable tax documents for all the states to where product is being shipped with account application paperwork. Tax exempt forms can be found at the following link and are organized by state. <https://www.hachettebookgroup.biz/booksellers/sales-tax/>
→ Established accounts (with HBG account numbers) send completed tax certificates to tax@hbgusa.com. New accounts (not yet assigned an HBG account number) send completed tax certificates to newaccounts@hbgusa.com.

Purchase Order Details

*Was an initial PO submitted with New Account Application? Yes No

*If no, what is the estimated date the initial PO will be submitted? _____

*Date initial PO will need to arrive by (if applicable): _____

Estimated dollar amount and/or total units of first PO: _____

Estimated annual order volume in dollars and units: _____

ELECTRONIC ORDERING DETAILS

HBG offers electronic ordering functionality. This service is OPTIONAL.

*Will this customer require an EDI relationship? Yes No

- If this customer will require an EDI relationship, please send a detailed email with known requirements to the Vendor Compliance Group ops.compliance@hbgusa.com
- Customers may also register at pubeasy.com or edelweiss.abovethetreeline.com for direct ordering.

continued on next page

*Does this customer require Special Packaging? Yes No

Note: fees may apply

→ *if non-standard packaging details are known, please contact the Vendor Compliance Group ops.compliance@hbgusa.com*

VENDOR COMPLIANCE ACCOUNT DETAILS

****Required fields for Vendor Compliance**

If your account does not require review by Vendor Compliance, you may ignore this section and proceed to the credit application on page 4.

**Business channel: {Please specify Retail (direct to store or DC), dotcom, direct to consumer drop ship}

**Product to be ordered: {please specify the publisher and/or imprint}

Is there potential to ship to Canada? Yes No

**Is Net pricing required? Yes No

Customer Department: {if known} _____ Customer Vendor ID: {if known} _____
(dept. that product will be sold into)

**Do ISBNs need to be set up on a customer portal? Yes No

→ *If this customer requires item setup, please contact the Vendor Compliance Group ops.compliance@hbgusa.com and request a Customer Item Setup Starter form.*

VENDOR COMPLIANCE REQUIRED DOCUMENTS

**Routing guide sent to HBG? Yes No Requested from customer

**Vendor guide sent to HBG? Yes No Requested from customer

→ *If you have received any set up documents, customer portal links/logins please send directly to the Vendor Compliance Group ops.compliance@hbgusa.com*

continued on next page

NEW ACCOUNT APPLICATION FOR CREDIT TERMS

Business Name (Trade Style) – Be Precise

Corporate Name (if different from above) _____ Telephone Number _____

Street Address _____ City _____ State _____ Zip Code _____

Type of Business Organization: Corporation Partnership Sole Prop.

Number of Years in Business _____

D & B Rating _____

Financial Statement _____

Available thru D&B To Follow

Available on Request Attached

Owner – Partner – Officer Name & Title _____ Home Address _____

1. _____

2. _____

3. _____

AP Contact: _____ Phone: _____ Email: _____

Bank Reference

Name _____ Address _____ City _____ State _____ Zip Code _____

Officer to Contact _____ Acct # _____ Phone Number _____

continued on next page

Trade References – please provide three references.

Company _____ Account Number _____
Address _____ City _____ State _____ Zip Code _____
Phone _____ Fax _____

Company _____ Account Number _____
Address _____ City _____ State _____ Zip Code _____
Phone _____ Fax _____

Company _____ Account Number _____
Address _____ City _____ State _____ Zip Code _____
Phone _____ Fax _____

The foregoing application for an open line of credit is correct to the best of my knowledge. You are authorized to contact the references provided.

Name _____

Signature _____

Title _____