

PERFORMANCE DISTRIBUTING
6910 North Merchant Court
Baton Rouge, LA 70809
Phone: (225) 755-7668
FAX: (225) 752-5967
salesteam@performancedistributing.com

Wholesale Account Information / Application

New Accounts: All new accounts are on a prepay, credit card or COD (cashier check/money order) basis. After a period of no less than 180 days, we will evaluate your purchase/payment record to put your account on COD Company Check. You may choose to stay on prepaid credit card.

Purchase Order: All purchase orders must be in writing and faxed or e-mailed to us. We are not responsible for errors due to incorrect and/or incomplete automobile information, so please check over your orders before you send them.

Buy-In Policy: We currently have two levels of pricing available. The first level mandates monthly minimum purchases of \$250 (averaged per quarter) and requires no buy-in. The second level pricing mandates a buy-in of \$500 and assures that you are buying at the best possible pricing. Once the buy-in has been made, you will be required to maintain a \$500/month minimum (averaged per quarter) purchases to stay at that level. (Please make a check mark at the level you choose)

Refused Shipments: Your account will be placed on hold if shipments are refused or returned without prior authorization. Refused shipments are subject to a restocking fee and all applicable freight charges both inbound and outbound.

Cancelled and/or Returned Orders: Any item returned is subject to a maximum 25% restocking fee less any incurred freight costs. If an item is returned to us without notification, the 25% restocking fee will be automatically assessed.

Drop Shipping: Drop shipping is available for our established accounts which are in good standing. At this time, we charge no fees for drop ship orders. This may change at a later date. All drop ships are "anonymous" indicating that the package has been sent from you to your customer with your return address.

Return Authorizations: All returns due to defect must be approved. When approved, you are responsible for all shipping charges and it is your right and responsibility to charge your customer for these shipping charges.

PLEASE FAX THIS SIGNED APPLICATION & BUSINESS LICENSE BACK TO US:

Business Legal Name: _____

Business Working Name: _____

Street Address: _____

City/State/Zip: _____

How long at address: _____

List any previous auto parts store ownership or affiliation: _____

Own or Rent building?: _____

Have you ever filed for bankruptcy?: _____

Anticipated monthly volume: _____

Your (President/Principal Partner) Name: _____

Street Address: _____

City/State/Zip: _____

Telephone #: _____

Credit Reference Information:

Business:

Bank _____

Address _____

Telephone # _____ Account # _____

Personal:

Bank _____

Address _____

Telephone # _____ Account # _____

Primary Business References:

Company #1 _____

Telephone #: _____

Company #2: _____

Telephone #: _____

Company #3: _____

Telephone #: _____

The undersigned does hereby authorize Performance Distributing to contact and secure confidential information from the above referenced bank and business references and promises to pay for all purchases made in any given month. In the event it becomes necessary for Performance Distributing to incur collection costs for any amount due under this agreement, the undersigned agrees to pay such costs including reasonable attorney fees incurred by Performance Distributing.

Your Signature: _____ Date: _____

Type of Business / Payment Information:

Corporation_____ Partnership_____ Sole Proprietor_____

Limited Liability Contract_____

Business Phone Number: _____ Business Fax Number: _____

E-mail Address: _____

Website address: _____

Account Manager/Purchaser: _____

Date Business Started _____ Primary Type of Business: _____

State resale Tax ID Number: _____

Federal tax ID Number: _____

Type of account Desired:

Credit Card_____ C.O.D./Check_____

Credit Card is required for prepay and also as an account guarantee for C.O.D. accounts :

Card Type: _____ Expiration Date: _____

Card #: _____

3 Digit Security code on backside of card (4 digit front for AMEX): _____

Billing Street Address: _____

City/State/Zip: _____

Name on Card: _____

Users Authorized to make charges: _____

I (your name) _____ authorize charges to be made on card noted above for orders, both verbal and via fax or e-mail purchase order, that will be made from (your company) _____ to Performance Distributing / TBH Sales, Inc.

Personal guarantee that the above information is correct:

Signature: _____

Date: _____

Performance Distributing reserves the right to make changes to this contract at any given time and without prior written notice.