

DATE OF APPLICATION: _____



CALIFORNIA HOBBY DISTRIBUTORS
415 S. PALM AVE. ALHAMBRA, CA 91803
TOLL FREE (800)-242-4440; FAX (800) 869-4622

DEALER APPLICATION

ALL INFORMATION MUST BE COMPLETED PRIOR TO SUBMISSION

Business Name: _____ Corporate Name: _____ Resale #: _____ Store Address: _____ City, State Zip: _____ Phone #: _____ Fax #: _____	Billing Address: _____ _____ _____ Sq. Feet: _____ Rent: \$ _____ /mo. Years in Business: _____ Landlord Name: _____ Landlord Address: _____				
Ownership Name: _____ Home Address: _____ City, State, Zip: _____ Home Phone #: _____ Cell Phone #: _____ Drivers License #: _____	E-Mail Name (co-owner): _____ Home Address: _____ City, State, Zip: _____ Home Phone #: _____ Cell Phone #: _____ Drivers License #: _____				
Key Personnel Authorized Buyers: 1) _____ 2) _____ Accounts Payable: _____					
References <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"> Name: _____ Address: _____ City, State, Zip: _____ Phone #: _____ Fax #: _____ Account #: _____ Date Opened: _____ Terms: _____ </td> <td style="width: 50%; border: none;"> Name: _____ Address: _____ City, State, Zip: _____ Phone #: _____ Fax #: _____ Account #: _____ Date Opened: _____ Terms: _____ </td> </tr> <tr> <td style="border: none;"> Name: _____ Address: _____ City, State, Zip: _____ Phone #: _____ Fax #: _____ Account #: _____ Date Opened: _____ Terms: _____ </td> <td style="border: none;"> Name: _____ Address: _____ City, State, Zip: _____ Phone #: _____ Fax #: _____ Account #: _____ Date Opened: _____ Terms: _____ </td> </tr> </table>		Name: _____ Address: _____ City, State, Zip: _____ Phone #: _____ Fax #: _____ Account #: _____ Date Opened: _____ Terms: _____	Name: _____ Address: _____ City, State, Zip: _____ Phone #: _____ Fax #: _____ Account #: _____ Date Opened: _____ Terms: _____	Name: _____ Address: _____ City, State, Zip: _____ Phone #: _____ Fax #: _____ Account #: _____ Date Opened: _____ Terms: _____	Name: _____ Address: _____ City, State, Zip: _____ Phone #: _____ Fax #: _____ Account #: _____ Date Opened: _____ Terms: _____
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Type of Business

Walk-in Retail: Shopping Center Strip Mall Free Standing
 Manufacturer
 Special Effects
 Number of Employees: _____ full-time _____ part-time Annual Sales: _____
 % of Projected Sales:
 _____% Trains; _____% Plastic; _____% Rockets; _____% Crafts; _____% R/C; _____% Paint/Tools/Glue

Desired Type of Account

COD/Cash COD/Check Open 14 Day Open 30 Day

Bank Information

Bank Name: _____ Account #: _____
 Address: _____ Account Officer: _____
 City, State, Zip: _____ Type of Account: _____
 Phone #: _____

Release: I hereby authorize release of account information to California Hobby Distributors for the purpose of establishing a business relationship and/or extending credit. The bank will be held harmless for any decisions made based on the provided information. I agree that a copy of this authorization is as valid as the original.

(Sign) _____

Inventory Insurance

Carrier Name: _____
 Address: _____
 City, State, Zip: _____
 Phone #: _____
 Policy #: _____
 Policy Limit: _____

Note: Please remember to include the following:

- A copy of the first and last page of the store **lease**.
- Interior and exterior **photos** of your store, noting date of photo taken on the back.
- A copy of owner's **photo ID** (i.e. drivers' license).
- A copy of your **business license**. These requirements are for your protection as well as ours, to prevent fraud, and guard legitimate hobby retailers.

Guaranty

In consideration of the credit which California Hobby Distributors may hereafter extend to _____ (hereafter "dealer"), its successors and assigns, and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the undersigned absolutely and unconditionally guarantees the following:

1. The full and prompt payment of any indebtedness, present and future, owed by dealer to California Hobby Distributors upon presentment of an unpaid invoice and without the necessity of initiating litigation, reducing California Hobby Distributors' claim to judgment, or making any other demand for payment, and without the necessity of any notice of non-payment or any other notice to which dealer might be entitled, all of which the dealer expressly waives; and

2. The payment of all reasonable attorneys' fees, collection costs, costs of suit and other damages and/or expenses incurred by reason of dealer's non-payment or in connection with the presentment or enforcement of this Guaranty. Dealer further understands and acknowledges that placing an order with California Hobby Distributors constitutes doing business in California, and is therefore subject to the laws of California. No failure on California Hobby Distributors' part to pursue any remedy or to enforce any contraction provision against the dealer shall constitute a waiver of California Hobby Distributors rights under this Guaranty.

Individual Guarantor

Company Guarantor (Corporate Name)

(Signed) _____
