



**ICE HOUSE®**  
DISTRIBUTION

# APPLICATION FOR WHOLESALE ACCOUNT

Resale #		State Licensed In:
Full Legal Name (Company)	Phone:	Fax:
Doing Business As:	Email Address	
Address / City / State / Zip:		
Company Type: <input type="checkbox"/> CORPORATION <input type="checkbox"/> PROPRIETORSHIP <input type="checkbox"/> PARTENERSHIP <input type="checkbox"/> FRANCHISE <input type="checkbox"/> OTHER		
Federal Tax ID#:	Year Established:	At Present Location Since:

## REFERENCES

Company Name:	Account Contact:	Phone:
Company Name:	Account Contact:	Phone:
Company Name:	Account Contact:	Phone:

## OWNERS INFORMATION:

Owner's First Name:	Last Name:	Social Security #
Home Address: City, State, Zip		Home Phone #:
Authorized Signature		Date:
Owner's First Name:	Last Name:	Social Security #
Home Address: City, State, Zip		Home Phone #:
Authorized Signature		Date:

*By signing this application, I authorize Ice House Distribution or it's agent to investigate my financial records and personal credit. If I request, you will tell me if my consumer credit reports were investigated, and the name and address of the consumer credit agency that furnished the report. By signing this application, I acknowledge that I have personally guaranteed the debts and obligations of my business and agree that I am personally obligated to perform all the terms of and make all payments to Ice House Distribution required by, the agreement of which this application is a part.*

**Product orders and payments:** Store is responsible for paying the full amount of all current and future invoices in the agreed amount of time listed for the account. We require a valid credit card on file for ordering product with credit terms. The credit card will be verified when ordering and must have an available balance greater than the invoice before terms will be offered. If the balance is not paid by the agreed upon terms we will first make contact with the account holder about the past due balance and then, after a 5 day grace period, we reserve the right to charge the credit card on file. Credit cards and the credit application is not required for cash only or COD accounts.

**Delivery:** We will use all reasonable efforts to ensure delivery of product. The customer bears the risk of damage or loss of the equipment after Ice House Distribution delivers it to the transportation shipping point.

**Operation of the equipment:** The customer shall be responsible for the operation of the equipment. The customer shall operate the equipment in a reasonable and competent manner and in compliance with the warning labels. The customer must comply with any rules, laws and regulations in connection with the operation of the equipment.

**Disclaimers and Warranties:** The equipment sold is under a one year no hassle warranty for manufacturers defects. We will replace the sold equipment due to defects not caused by the user. We do not accept responsibility for the misuse of products. Any defects or problems with the equipment received must be reported to us within 45 hours of receiving shipment.

## CREDIT CARD INFORMATION

Credit Card Type:  VISA     MASTERCARD     I would like to pay COD.

Card # \_\_\_\_\_ Exp. Date: \_\_\_\_\_

CVV (3 Digit Code) \_\_\_\_\_ Is billing address same as shipping?  Yes  No If not, Please list address on next line:

\_\_\_\_\_

\_\_\_\_\_  
Signature of Company Representative

\_\_\_\_\_  
Printed Name and Position

I would like to pay by credit card, and authorize Ice House Distribution to keep my card information on file for future orders. (Please fill out the above information if you wish to use your credit card for payment.)

**FOLD AND PLACE THIS FORM IN AN ENVELOPE AND MAIL TO: IceHouse Distribution • 1924 Hwy 95 North, Bastrop TX 78602 OR FAX TO: 512-321-7577**