



Classy AF

(Account Form) Version 1.4

300 N. York St.
Houston, TX 77003
Ph-800-372-8007
Fax-713-225-2623
sales@classyart.net

Corporate Name: _____ Phone: _____

DBA: _____ Alt. Phone: _____

Billing Address: _____ Shipping Address: _____

City, State, Zip: _____ City, State, Zip: _____

Fax: _____ Tax I.D#: _____

Under present ownership since: _____ Resale Lic.#: _____

Website: _____ Lyons #: _____

Sales Representative: _____

Business Type:

Furniture

Gift

Specialty

Designer

Online

Hospitality

Other _____

Authorized Buyers Contacts

Contact: _____ Email: _____

Phone : _____ Cell: _____

Contact: _____ Email: _____

Phone : _____ Cell: _____

Accounts Payable Contacts

Contact: _____ Email: _____

Phone : _____ Cell: _____

Contact: _____ Email: _____

Phone : _____ Cell: _____

Receiving Contact

Contact: _____ Email: _____

Phone : _____ Cell: _____

Delivery Appointment Required; Yes _____ No _____

Sales Agreement

In consideration of extension of delivery of merchandise by Classy Art LLC., the applicant agrees, acknowledges and warrants the following: Applicant agrees to notify Classy Art LLC. promptly in writing of any change in ownership of the business conducted under the account name, and agree to liability for all charges to the business conducted under the account name unless and until you provide written notice of the change on ownership. Applicant hereby certifies that the above given information is true and accurate. Claims: Breakage, shortage and defective merchandise claims must be reported in writing within 7 days of receipt of merchandise. Returns: Returned merchandise will only be accepted after prior return authorization is granted by the resource in writing. Applicant hereby certifies that once an order is approved, in writing or verbally, the order is noncancellable without a 40% restocking/handling/liquidation fee due to orders being built and made to order immediately upon approval. All orders are subject to this fee.

Payment - (Please select one)

Extended Terms

Credit Amount Requested: \$ _____

Applicant hereby authorizes my/our bank, trade references and Credit Bureaus to release information for the purpose of granting credit. The undersigned represents and warrants that the information given is true and correct and attests financial responsibility, ability and willingness to pay all invoices within 30 days of date of invoice or as otherwise agreed upon.

Applicant also agrees to pay Classy Art LLC. a finance charge calculated at a rate of 1.5% per month (18% annually) beginning on day 31. A fee of \$25.00 will be charged on all returned checks. In the event of default in the payment of any amount due, Applicant agrees to pay all outstanding finance charges, reasonable collections costs, including agency, attorney's fees, and court costs incurred. Classy Art LLC. maintains security interest in products sold until such time as payment is received in full by Classy Art LLC. In the event any portion of the balance is not paid when due: Applicant, the belowsigned, personally guarantees payment of any and all parts of the amount not paid by the company, corporation or party named in the billing.

Or

Credit Card

As the credit card holder, my signature below authorizes Classy Art LLC. to charge my credit card for the amounts invoiced on existing and future purchases, both verbally or written, approved by the Corporate Name listed on page 1. Your completion of this form helps us to protect you, our valued customer, from credit card fraud. Command Prompt, Inc. will keep all information entered on this form strictly confidential.

Card Type: American Express Discover Visa Master Card

Credit Card Number: _____

Expiration Date: _____ / _____ Card Security Code: _____

I have read and understand fully the terms and conditions of this agreement. By my signature below, I am duly authorized to represent the Corporate Name listed above for our company and agree to the terms and conditions outlined in this document.

Print Name: _____

Date: _____

Signature: _____