

Line(s) of Interest: _____

Sales Rep w/Whom You Spoke: _____



Distribution Credit Application – Part I

Corporation LLC Sole Proprietorship Partnership

Company Name: _____ Contact: _____
Billing Address: _____ Phone: _____
City/State/Zip: _____ Fax: _____
Shipping Address: _____ Cell: _____
City/State/Zip: _____ E-Mail: _____

UPS Residential UPS Commercial Showroom: Yes No

Website Password Choice: _____
Alternate Contacts/Numbers/E-Mails: _____

Principal Officers

Name: _____ Title: _____
Name: _____ Title: _____

Account Type Requested

Net 30 Credit Card COD Cash/Check In Advance

If you are applying for open terms, please fill out the trade references section below. Trade
References

Company: _____ Phone: _____
Address: _____ Fax: _____
City/State/Zip: _____ Account #: _____

Company: _____ Phone: _____
Address: _____ Fax: _____
City/State/Zip: _____ Account #: _____

Company: _____ Phone: _____
Address: _____ Fax: _____
City/State/Zip: _____ Account #: _____

Tax ID # _____ Federal ID # _____ Resale # _____

I certify that all above information on this form is correct and give permission to The Aurora Group, Inc. to investigate all company credit information that can be accrued to aid in processing this application.

Signature: _____ Date: _____

Print Name: _____ Title: _____

The Aurora Group, Inc.
500 S. Whitehorse Rd. / Phoenixville, PA 19460
TF 888.431.8687 / P 610.935.8133 / F 610.935.8138
www.auroragroup.biz



Distribution Credit Application – Part II

We require a valid credit card to be kept on file for all accounts. Please notify us of any changes to your credit card information to include new number or expiration dates.

In the event any account with open terms becomes past due we reserve the right to charge this credit card to satisfy any outstanding balances.

Thank you for your business!

Best Regards,
The Aurora Group

Credit Card Information

Card Number: _____ Security Code: _____

Name as it appears on card: _____ Exp.: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Authorized Signature: _____ Date: _____

Print Name: _____ Title: _____

500 S. Whitehorse Rd.
Phoenixville, PA 19460
P 610.935.8133
F 610.935.8138



Bank Credit Inquiry Form

We require this information only if open terms are requested.

Company Information

Company Name: _____ Contact: _____
Address: _____ Phone: _____
City/State/Zip: _____ Fax: _____

Financial Institution Information

Bank Name: _____ Account Number: _____
Phone: _____ Fax: _____

I, the undersigned, certify all the above information is correct. I also authorize all parties to release all credit and financial information requested. This information shall be kept strictly confidential.

Signature: _____ Date: _____
Print Name: _____ Title: _____

This section for bank use only

Dear financial institution,
The company above has listed you as a credit reference. Please complete this form and fax it back to us at your convenience. The information provided shall be kept strictly confidential. Thank you.

Date Established: _____
Average Balance: _____ Current Balance: _____

Insufficient Funds? Yes No

If yes, how many occurrences? _____ For how much? _____

Comments: _____

Bank Officer: _____ Date: _____

The Aurora Group – Terms of Sale

Freight

- All orders totaling \$1000 or greater (with the exception of PlanterSpeakers) ship freight prepaid to the dealer's warehouse.
- All orders are shipped insured for the full cost of the product.
- Any order may be picked up directly from Aurora's warehouse during normal business hours (M-F, 8:30am – 5:30pm) or by appointment.

Returns and Restocking

- Items may be returned within 30 days of the invoice date.
- RA's are required for returns and will be valid for 30 days from issue date
- Returns for non-defective, unopened product may carry up to a 20% restocking fee. This fee will be deducted from the total credit.
- Defective product may be returned for credit, exchange, or advance replacement. If parts are found to be missing from the defective merchandise, their replacement cost may be billed to the dealer.
- Shipping costs are non-refundable.

Payment, Fees, and Interest

- To ensure prompt processing, prepayment is required on opening orders. If you qualify for open terms, your account will be established with a \$2500 initial credit line. This credit line may be raised or lowered based on available credit information and/or Aurora's discretion.
- Prepayment terms may be credit card, COD, or check in advance.
- Accounts with open terms require a credit card on file in the event the account becomes past due. In accordance with our credit application, Aurora will contact the dealer prior to charging the card to satisfy the past due balance. Invoices unable to be collected with a credit card will be charged 1.5% monthly interest on the balance.
- On accounts with open payment terms, all projectors are net 15.
- A \$25 fee will be assessed for all returned checks.
- The dealer accepts responsibility for all reasonable costs incurred in connection with Aurora's efforts to collect past due accounts, including, but not limited to, attorneys' fees, collection agency fees, and court costs.

Deviation from any of the above listed policies will be subject to Aurora's discretion.

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