

DEALER REGISTRATION



Quality Products Co.

673 Avenue C, White City, OR 97503-1078 U.S.A.

The purpose of the Dealer Registration is to identify your firm as a dealer entitled to dealer discounts. Please be sure to fill in all requested information completely and return to us with signature to avoid delay in processing your dealer application & potential initial order.

DEALER QUALIFICATIONS: YOU MUST FURNISH PROOF THAT YOU ARE A DEALER, WITH A COMMERCIAL ZONED BRICK & MORTAR STORE FRONT WITH BUSINESS HOURS, SELLING MODEL RAILROAD EQUIPMENT TO THE PUBLIC. PHOTOS OF YOUR STORE, WITH BOTH INSIDE AND OUTSIDE VIEWS, ARE REQUIRED. A COPY OF YOUR LISTING IN THE YELLOW PAGES SHOULD BE INCLUDED, IF AVAILABLE.

Firm Name _____

Mailing Address _____ City/State/Zip _____

Store Address _____ City/State/Zip _____

Phone No. (Include Area Code) _____ Fax No. _____

E-Mail _____ Web Site _____

Your Name _____ Position with Firm _____

How long have you been in this business? _____ Is location zoned for business? _____

Do you Sell through your website? _____ Business License # _____

What are your regular hours? _____

List the Model/Hobby Magazines in which you advertise _____

Type of Store? Train Shop _____ General Hobby Shop _____ Other _____

Type of Store Location? Downtown _____ Shopping Center _____ Free Standing _____

Local Business District _____ Other _____

DEALER TERMS ALL ORDERS

Minimum \$100.00 net. No discounts will be applied to orders below \$100 Net. All orders will be charged shipping & handling fee. Regular surface shipping within the USA included with minimum \$100.00 net purchase. No COD'S !!! No Drop shipping.

DOMESTIC DEALER TERMS

All orders will be charged shipping & handling fee. Regular surface shipping within the USA included with minimum \$100.00 net purchase. No COD'S !!! No Drop shipping. Dealers are responsible for all insurance, taxes, duties, or customs fees. Payment by VISA, MasterCard, Company Check, Cashiers Check or Money Order in US Dollars prior to sending the fulfilled order. **A returned check fee of \$25 will be charged and accrued interest until paid in full.**

FOREIGN DEALER TERMS

All orders will be charged all shipping & handling fees. No COD'S !!! No Drop shipping. Dealers are responsible for all insurance, taxes, duties, or customs fees. If total shipping quoted is less than actual shipping, we will adjust shipping charges accordingly. Payment by VISA, MasterCard, Cashiers Check or Money Order in US Dollars prior to sending the fulfilled order.

ORDERS

All orders must be placed the online ordering portal through our website at <https://www.kadee.com>. **\$2500 international package cap.**

Please fill in **all** information including page 2, and be sure to **sign your name**.

Terms & conditions subject to change without notice. See Kadee@ website www.kadee.com for current Terms & Conditions.



BACKGROUND INFORMATION



F R O M
 NAME _____ TEL/FAX _____
 ADDRESS _____ YEARS IN BUSINESS _____
 CITY _____ STATE _____ ZIP _____ YEARS AT THIS LOCATION _____

O W N E R S H I P
 NAME _____ TITLE _____
 NAME _____ TITLE _____
 NAME _____ TITLE _____
 CORPORATION PARTNERSHIP SOLE PROPRIETORSHIP

B A N K
 NAME _____ TEL/FAX _____
 ADDRESS _____ ACCOUNT REP. _____
 CITY _____ STATE _____ ZIP _____ MONTHLY CREDIT DESIRED _____
 CHECKING ACCT. _____ SAVINGS ACCT. _____ LOC _____

T R A D E R E F E R E N C E S
 PLEASE LIST SUPPLIERS WHERE YOU HAVE HAD OPEN ACCOUNT BILLING FOR AT LEAST ONE YEAR.
 NAME _____ TEL/FAX _____
 ADDRESS _____ ACCT. NO. _____
 CITY _____ STATE _____ ZIP _____ HOW LONG DEALT WITH _____
 NAME _____ TEL/FAX _____
 ADDRESS _____ ACCT. NO. _____
 CITY _____ STATE _____ ZIP _____ HOW LONG DEALT WITH _____
 NAME _____ TEL/FAX _____
 ADDRESS _____ ACCT. NO. _____
 CITY _____ STATE _____ ZIP _____ HOW LONG DEALT WITH _____
 NAME _____ TEL/FAX _____
 ADDRESS _____ ACCT. NO. _____
 CITY _____ STATE _____ ZIP _____ HOW LONG DEALT WITH _____

I/WE CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT AND THAT I/WE CAN AND WILL COMPLY WITH YOUR TERMS.

DATE _____ SIGNED _____ TITLE _____
 DATE _____ SIGNED _____ TITLE _____

NOTE: This application for credit will be held in strict confidence and will be used only by our credit department.

FOR KADEE® USE ONLY

References checked by _____ Date _____
 Credit approved by _____ Date _____
 Credit refused by _____ Date _____