



1302 JORDAN AVENUE, PO BOX 322, MONTOURSVILLE, PENNSYLVANIA 17754-0322
PHONE 570-368-2379 ORDERS 1-800-327-5126 FAX 570-368-5046

DEALER POLICY EFFECTIVE April 1, 2002

DEALER REQUIREMENTS

You must have a bank account under the name of your business, personal checking accounts are not acceptable. You must be operating a retail store that is open to the public with regular posted business hours. You may be asked to submit photos of the area of your store where merchandise is displayed. If you are a mail order business you must submit a copy of the ad you are running to promote your business and you must also list your UPS shipper number. Individuals who sell only at train meets/ shows/ conventions do not fulfill our dealer qualifications. Individuals who sell only on the internet do not fulfill our dealer qualifications.

DEALER MINIMUMS

- Dealer minimum order is **\$60.00** net shipped.
- Orders under **\$60.00** net will not be processed.

DEALER DISCOUNTS

OPEN ACCOUNT: Orders over \$150.00 Net Shipped

- Full Freight Allowance 15 days.
- Full Freight Allowance only if paid on or before 15th day from invoice date.
- Check Must be Post Marked by 15th day following Invoice date.
- Payment at 16 Days and later after invoice date - Net only NO Freight Allowance
- Freight Discounts taken late will be billed back
- All Invoices Must Be Postmarked And Paid IN FULL The 30TH Day following the Invoice Date.
- *** PAST DUE THE 31ST DAY **
- 1 1/2% per month Late Fee
- No shipments will be made to past due accounts NO EXCEPTIONS
- No Freight Discount on Orders Under \$150.00 Net Shipped
- Full Freight Allowance applies to continental United States Only.
- Alaska & Hawaii orders pay all freight charges.

Orders under \$150.00 Net Shipped: No Freight Discount

Personal checks are not acceptable for payment of dealer invoices. Payment using personal checks will result in dealership termination. **Charge cards are not acceptable for payment of dealer invoices.**

Past due accounts will not be shipped. No exceptions. Non payment of past due charges will result in dealership termination.

COD: The only method of payment for COD shipments is **company check** or **cash**. Receipt of personal checks from UPS for dealer COD shipments will result in termination of your COD shipping status. **Freight plus COD charge of \$12.50 per order if less than 150.00 net. COD charge of \$7.50 on orders over \$150.00. No COD's will be shipped for more than \$500.00 net.**

CHECK WITH ORDER: Bowser Manufacturing reserves the right to clear all checks prior to shipment of order.

We do not ship on a pro forma basis. A check must be submitted for payment of the order before we will process any orders.

DEALER WAREHOUSE PICKUPS

If you wish to visit our warehouse for a dealer pick up the following conditions apply:

- You must be an approved Bowser dealer.
- You must phone in advance for an appointment. Drop-ins cannot be accommodated. When you phone for an appointment the method of payment will be established. Credit limits or the amount of checks accepted will be discussed. It may be necessary for cash payment only.
- Only one person may go through our warehouse. That individual will be accompanied by a Bowser employee.

DEALERSHIP TERMINATION

Any account that is inactive for a 12 month period will be closed. Closed accounts will not be reopened until we have reviewed a current dealership application.

Bowser MANUFACTURING CO., Inc.

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DEALER APPLICATION Please Print Clearly

Model Retailer Magazine 9-04

FIRM NAME _____

MAILING ADDRESS _____

STORE ADDRESS (SHIPPING ADDRESS) _____

CITY / STATE / ZIP _____

PHONE () _____ FAX () _____ HOME () _____

EMAIL _____

OWNER'S NAME _____ YOUR NAME _____

YOUR POSITION WITH FIRM _____

HOW LONG HAVE YOU BEEN IN BUSINESS _____

IMPORTANT: IF THIS IS A NEW BUSINESS VENTURE, PLEASE SEND PHOTOS OF YOUR STORE AND THE AREA OF YOUR STORE WHERE MERCHANDISE IS DISPLAYED.

STORE LOCATION: () DOWNTOWN () SHOPPING CENTER () LOCAL BUSINESS DISTRICT
() HOME () OTHER _____

IMPORTANT: IF YOUR BUSINESS IS IN YOUR HOME YOU MUST INCLUDE A COPY OF YOUR AD.

DO YOU SELL MAIL ORDER: () YES () NO UPS SHIPPER NUMBER _____

IMPORTANT: IF YOU SELL EXCLUSIVELY MAIL ORDER YOU MUST INCLUDE A COPY OF YOUR AD.

SALES TAX LICENSE NUMBER _____ HOW LARGE IS YOUR STORE _____

BUSINESS HOURS _____

NUMBER OF EMPLOYEES: FULL TIME _____ PART TIME _____

IS YOUR STORE LISTED IN THE TELEPHONE DIRECTORY:
GENERAL LISTING () YES () NO YELLOW PAGES () YES () NO

NAMES OF WHOLESALE SUPPLIERS: PLEASE, FILL OUT COMPLETELY.

NAME _____

ADDRESS _____

CITY / STATE / ZIP _____

NAME _____

ADDRESS _____

CITY / STATE / ZIP _____

NAME _____

ADDRESS _____

CITY / STATE / ZIP _____

SIGNATURE OF APPLICANT _____ DATE _____

SIGNATURE OF CHECK SIGNER _____ DATE _____