

Wheels Direct LLC

3640 Kennebec Dr., Eagan, MN 55122

Phone: 651-967-8690 Toll Free: 1-888-852-2430 Fax: 651-289-0159

Business Application - General Information

Account Type: Credit Card COD - Company Check COD - Cash Only Credit Amount Request _____

Legal Business Name _____ Dunn & Bradstreet # _____

DBA Name _____ Years in Business _____

Address 1 _____ Address 2 _____ PO Box _____

City _____ State/Province _____ Zip/Postal Code _____ Country _____

Phone Number _____ Fax Number _____ e-mail _____

Federal Tax ID/EID _____ State Tax ID _____

Entity: Sole Proprietorship Partnership LLP Corp-Incorp Year/State Incorporated in _____

Accounts Payable Contact _____ Phone Number _____ Fax Number _____

Billing Address _____ City _____ State/Province _____ Zip/Postal Code _____

Principle's Name _____ Title _____

Principle's Address _____ City _____ State/Province _____ Zip/Postal Code _____

Phone Number _____ Fax Number _____ SSN# _____

Bank References

Bank Name _____ Contact _____ Account # _____

Phone Number _____ Fax Number _____ Checking Savings Line of Credit

Bank's Address _____ City _____ Sate _____ Zip/Postal Code _____

Bank Name _____ Contact _____ Account # _____

Phone Number _____ Fax Number _____ Checking Savings Line of Credit

Bank's Address _____ City _____ Sate _____ Zip/Postal Code _____

Trade References

Company Name _____ Phone Number _____ Fax Number _____

Company Name _____ Phone Number _____ Fax Number _____

Company Name _____ Phone Number _____ Fax Number _____

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Business Application - Terms and Conditions

Herein the term "you" shall refer to Wheels Direct LLC and the term "we" shall refer to the company and/or persons requesting a business account and/or credit. To induce you to extend credit to our firm, we agree to pay all invoices with the stated terms of sale as noted on the invoice.

In addition, cash discounts will be allowed only if earned within the discount period. Unearned cash discounts will be due in full and treated with equal importance as each invoice.

If for any reason one of our checks is returned due to non-sufficient funds, we will be required to replace the original check amount, along with any assessed bank service charge, with "certified funds" upon receipt of notification from you.

We authorize the release of credit and other financial information, including, but not limited to banking information whether verbal or written, from the entities we have specified in this application to you.

If it is necessary for you to place our account into the hands of a collections agency or an attorney, we agree to pay the cost of collection plus attorney fees, court costs and interest as permitted by laws governing this transaction.

We understand and recognize that in approving credit for us you will be making a commitment to extend credit in any particular amount or for any period of time and that you may discontinue credit at any time, refuse to extend credit, in all cases in your sole discretion, in addition, you may withdraw any credit approval if any matter causes insecurity on your part in extending credit to us.

We undersigned, hereby state that the foregoing agreement of terms and conditions are agreed upon and that the information given on page one of this application is true and correct.

Officer's Signature _____ Title _____

Print Name _____ Date _____

Continuing Personal Guarantee

The undersigned agrees to act as a personal guarantor for all debts incurred now and in the future by the Company, Organization, Persons, or Corporations who have signed the credit application and have been extended credit both now and in the future. Guarantor recognizes, understands and agrees that this guarantee cannot be revoked, or rescinded, or discharged in any case under Title 11 or 7 of United States code, if any principal balance remains outstanding. In addition, the undersigned submits him/herself if under the personal jurisdiction in the City, County, and State that Wheels Direct LLC conducts business in.

Officer's Signature _____ Date _____

Print Name _____ Social Security # _____

Address _____ City _____ State/Province _____ Zip/Postal Code _____

Return Policy

Products may be returned for credit without handling/restock penalties within 10 days of invoice, 11-30 days with a 10% handling/restock charge and 30-45 days with a 25% handling/restock charge, products older than 45 days are not returnable. Shipping/delivery charges will not be credited on any sale.

All returns must fall under the following guidelines: Product must be new and in unmounted condition, product must be in original packaging, all accessories must be present and securely packaged. Mounted wheel and tire packages are not returnable. Products designated as special order or discontinued are not returnable under any circumstance. All return shipping/delivery must be prepaid.

Credit is issued to the respective customers account for future purchases only.

You must call to request a return authorization prior to shipping the product back to us.

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Business Application - General Bank Reference

Bank Name _____ Phone Number _____ Fax Number _____

Address _____ City _____ State/Province _____ Postal/Zip Code _____

Bank Contact _____

I authorize Wheels Direct LLC to inquire about my account with your bank for credit purposes

Company _____ Account # _____

Address _____ City _____ State/Province _____ Zip/Postal Code _____

Signature _____ Date _____

Business Application - General Information

The above company has given your name as a banking credit reference, we would appreciate any information you may provide that would help in the establishment of credit relations.

Any information provided shall remain confidential.

How long has this account been open? _____

What is the average monthly balance? _____

Have there been any NSF checks? _____ If so, how many? _____

Comments:

Thank you for assistance

Credit Manager

Wheels Direct LLC

Please fax back to 651-289-0159

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Uniform Sales and Use Tax Certificate Multi-Jurisdiction

Blanket Certificate Single Purchase Certificate

Business Name _____ Permit # _____

Address _____ City _____ State/Province _____ Zip/Postal Code _____

I hereby certify that I hold a valid sales tax and use permit as issued and registered by the governing entity of the state listed above.

I am in the business of: _____

I will purchase: Custom wheels, tired, automotive related accessories and services from Wheels Direct LLC

I declare that the items we will purchase from Wheels Direct LLC will be resold in the form of tangible personal property. In the event any of such property is used for any purpose other than retention, demonstration, or display while holding it for sale in the regular course of business, it is understood that I am required by Sales and Use Tax Law to report and pay tax measured by the purchase price of such property. I also declare the information provided to you is correct and complete to the best of my/our knowledge and belief.

Providing false information or using an exemption certificate for items or services that will be used for purposes other than those being claimed is illegal and punishable by law.

Signature _____ Title _____

Print Name _____ Date _____

Please include a copy of your certificate when submitting your application.

When completed, please return to Wheels Direct LLC by mail:

**Wheels Direct
3640 Kennebec Dr.
Eagan, MN 55122**

or fax to:

651-289-0159