

P|C
Parkland Collection

Parkland Collection LLC

Name/Address

Last:	First:	Middle Initial:	Title
Name of Business:		Tax I.D. Number (Copy of State Issued Tax ID Must be Submitted)	
Address:			
City:	State:	ZIP:	Phone:

Company Information

Type of Business:		In Business Since:	
Legal Form Under Which Business Operates:			
Corporation <input type="checkbox"/>		Partnership <input type="checkbox"/>	
Proprietorship <input type="checkbox"/>			
If Division/Subsidiary, Name of Parent Company:		In Business Since:	
Name of Company Principal Responsible for Business Transactions:		Title:	
Address:	City:	State:	ZIP: Phone:
Name of Company Principal Responsible for Business Transactions:		Title:	
Address:	City:	State:	ZIP: Phone:

Bank References

Institution Name:	Institution Name:	Institution Name:
Checking Account #:	Checking Account #:	Checking Account #:
Address:	Address:	Address:
Phone:	Phone:	Phone:

Trade References

Company Name:	Company Name:	Company Name:
Contact Name:	Contact Name:	Contact Name:
Address:	Address:	Address:
Phone:	Phone:	Phone:
Account Opened Since:	Account Opened Since:	Account Opened Since:
Credit Limit:	Credit Limit:	Credit Limit:
Current Balance:	Current Balance:	Current Balance:

Customer certifies that the above stated information is true and correct as of the date of this application, and agrees to update this information when changes occur. Customer further understands and agrees that invoicing, billing, and payment terms on customer account will be as per the terms set forth in each order/invoice. Customer will be responsible for all cost Parkland Collection incurs in collection of any delinquent account, including legal fees. Customer authorizes Parkland Collection LLC. to obtain information regarding their respective credit, as permitted by law, for this credit application or future credit applications, and to retain this information on file.

 Signature _____ Date **Page 1**


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Shipping Information

Drop Ship Carrier	3 rd Party Account #
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Ordering Information

Order Confirmation Required (Yes/No)	
Order Confirmation Email	
Tracking Confirmation Required (Yes/No)	Tracking Confirmation Email

Invoice Information

Accounts Payable Contact Name	Contact Email
Contact Phone Number	
Preferred Invoice Method (Email or Address)	Invoice Email
Invoice Street Address	Invoice City, State, Zip Code

Credit Card Information

Type of Card (Master Card, Visa, American Express)	Credit Card #
Credit Card Security Code	Credit Card Expiration Date
Name as it appears on Credit Card	Signature
Date:	
Credit Card Address	
Authorized Users:	

I, _____ from _____, hereby authorize Parkland Collection LLC to charge my credit card account for purchases and incidental shipping charges or charges back billed to Parkland Collection. I authorize Parkland Collection to keep this card on file for all future purchases or order related incidentals mentioned above.



Parkland Collection - TERMS AND CONDITIONS

SHIPPING

Orders will ship within 1-2 business days if stock is available.

BACKORDERS

If a product is out-of-stock, the order will be placed on backorder. We will notify you of the backorder status and the estimated ship date (ESD). Unless you tell us otherwise, we will automatically ship these back ordered items as soon as they are available. All orders are shipped complete, unless you indication to us that it is permissible to ship the backordered item(s) separately. Credit card will not be charged for product(s) until they physically leave the warehouse.

RETURNS

If not completely satisfied with the purchase or have received a product damaged in transit, we will work with you to resolve the issue expeditiously.

Timing: All returns must be completed within 30 days of Delivery. Buyer is responsible for return shipping charges for all returns other than the manufacturing defects or errors. Items must be received back in NEW SELL-ABLE Condition.

Credit: 100% credit will be applied for defective products; please note that credit will not be issued for returns damaged during return shipment due to inadequate packaging.

Initiating Returns: Request a Return Authorization Number (RA#) for your return by contacting cs@parklandcollection.com. All email communications are responded to within 24-48 hours. All returns must be sent to Parkland Collection, 10501 NW 50th Street, Suite No 102, Sunrise, FL 33351 to receive proper credit.

Packaging/Labeling: Clearly mark package and/or return document with RA#. All products being returned must be in original or equivalent packaging. Lack of proper packaging material could result in damaged product during return transit and refusal of credit request.

Damaged Return: Send all defect/damaged item return requests to cs@parklandcollection.com. Product(s) will either be replaced or a credit will be issued. Submit the following documents to initiate the claim process:

- Brief description of the defect
- Picture(s) clearly depicting the defective product
- Picture of the packaging (please send picture even if packaging is intact)

PAYMENT TERMS

Unless approved for Net Terms all accounts must be paid by Credit Card (VISA, MasterCard). The credit card will not be charged until the product(s) is physically shipped.

By signing this Agreement, you are signifying that you have carefully read and understand the terms and conditions.

Signature

Date

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