



2900 W. Main St.  
Boise, Idaho 83702 USA  
Tel: 1 208 424 5081  
Fax: 1 208 287 8138

Remit to Account of: Eberlestock USA LLC  
US Bank NA, 205 N 10th St, Boise, ID 83701  
SWIFT: USBKUS44IMT  
ROUTING: 123103729 ACCT#: 153391143119

Business Applicant's Name (exact legal name)			Trade Name (if applicable)	
Tax ID Number	Year Business Established	Years Current Ownership	Years owners have been in this line of business	Annual Sales \$
Category:	<input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Individual	<input type="checkbox"/> CORPORATION <input type="checkbox"/> Sub-S Corporation <input type="checkbox"/> C-Corporation <input type="checkbox"/> Limited Liability Company	BUSINESS TYPE <input type="checkbox"/> Distributor (on-sell to other retailers) <input type="checkbox"/> Buying Group (Collective of retailers) <input type="checkbox"/> Independent Retailer	OTHER <input type="checkbox"/> Nonprofit Organization <input type="checkbox"/> Professional Association <input type="checkbox"/> Other
Primary Contact Person:		Tel:	Fax:	
Primary Contact Email:		Accounting Email:		

**BUSINESS LOCATION (Physical Ship-to Address):**

Street Address	
City / State / Country	Postal Code

**BUSINESS MAILING / CREDIT CARD BILLING ADDRESS (if different from above):**

Address	
City / State / Country	Postal Code

**FORWARDER / USA SHIP-TO ADDRESS (if applicable):**

Company Name / Contact	Phone:	Acct#
Address		
City	State	ZIP Code

**REQUESTED ACCOUNT TYPE:**

Wire Transfer Payment  Other (Explanation: \_\_\_\_\_)

Credit Card (Number \_\_\_\_\_) (Exp Date: \_\_\_\_/\_\_\_\_) (CVV: \_\_\_\_\_)

PLEASE NOTE: International accounts: invoices must be paid prior to release of goods to courier or forwarder.

**SHIPPING TERMS [Default Carrier International = USPS (or Choose Other Below)]**

<input type="checkbox"/> Fed Ex	<input type="checkbox"/> UPS	<input type="checkbox"/> US Postal Service
<input type="checkbox"/> Bill to Customer Account	Account #: _____	Other Courier/Company: _____
<input type="checkbox"/> Eberlestock Prepay/Add (Default)		

**Business Credit References (If you are applying for credit, list other businesses which provide credit)**

Name of Business	Email Address	Address	Contact Name

**RESPONSIBLE PARTY:**

**Signature of Guarantors:** (Each Shareholder, Partner, or Member owning 25 percent or more interest in the Business Applicant, or their assigns, sign below.)

X

Authorized Signature

Print Name

Date

X

Authorized Signature

Print Name

Date

Other Information / Notes:

--