



Thank you for your interest in Bill Hicks & Co., Ltd.

As one of the largest wholesale sporting goods distributors in the nation, we take pride in offering the products, services and technology tools you need to become a more profitable retailer.

Use the checklist below to ensure we have received everything we need to create your account.

New Dealer Approval Checklist:

Photos of your storefront: One of the exterior with signage and one of the interior with inventory related to the shooting sporting goods industry

Complete dealer application - Include firearm wholesaler references

Legible and signed copy of your Federal Firearms License (FFL)

Copies of any State and City licenses and/or permits required to conduct business in your area

Copy of signed exemption certificate for sales and use tax

Multiple Locations - Please submit a signed FFL and a signed resale certificate for each ship to location along with store number (if applicable), contact name, e-mail and phone number for each location

Please complete and submit sections A and B of the Dealer Application. Dealers requesting ACH terms must also submit section C – Blanket Authorization Agreement for Pre-Authorized Debit(s) (ACH). To complete the application process sign/date under the Terms & Conditions and the Personal Guarantee sections.

You can submit your documents by fax at (763) 473-0344 or by e-mail at customerservice@billhicksco.com.

After processing your dealer application, you will receive an approval message with your account number, including a username and password to access your account online.

For any questions, please call (763) 476-6200 or (800) 223-0702.

We look forward to your partnership with Bill Hicks & Co., Ltd.



DEALER PROFILE & CREDIT APPLICATION

SECTION A: DEALER INFORMATION

BUSINESS INFO

REQUIRED

Legal Business Name		F.E.I.N. or S.S.N.	
Doing Business As			
Premise Address		City / State / Zip	
Shipping Address (IF DIFFERENT THAN PREMISE)		City / State / Zip	
Billing Address (IF DIFFERENT THAN PREMISE)		City / State / Zip	
Business Phone	Cell	E-Mail	
Type of Business	Corporation, State of:	Partnership	Sole Partnership
		Limited Liability Corporation	Present Owner Since
Accounts Payable Contact	Phone	E-Mail	

OWNER(S), OFFICER(S), PARTNER(S)

REQUIRED

1. Name	Title	S.S.N.
Residence Address	City / State / Zip	
Phone	Cell	
2. Name	Title	S.S.N.
Residence Address	City / State / Zip	
Phone	Cell	

STORE INFO

State Resale Tax ID #	Issuing State	City or County License # (if applicable)
Has any Federal, State, or Local Firearms License issued to dealer or to any entity to which the signer of this profile has or had a beneficial interest in ever been revoked, suspended, or the subject of administrative proceedings? <input type="checkbox"/> No <input type="checkbox"/> Yes (please explain)		
Store Square Footage	Posted Business Hours	Number of Employees
Website URL	Main Buyer or Contact Name	
Business Zone:	Commercial Residential Rural Zoned Area	Approximate Annual Sales
Average inventory at this location:	Less Than \$5,000 \$5,000 - \$20,000 \$20,000 - \$50,000 More Than \$50,000	
Products Carried/Store Features:	Firearms Ammunition Archery Hunting Accessories Optics Knives Gun Range	
Insurer	Amount of General Liability Coverage	
Own Lease	Landlord's Name	Phone

SECTION B: BILL HICKS & CO., LTD. CREDIT APPLICATION

CREDIT FORM & AMOUNT

Credit Application is for:	Credit Line	ACH (Signed Blanket Authorization Agreement Required)	Requested Credit Line Amount
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FIREARMS WHOLESALE REFERENCES (Please list firearm wholesaler references where you presently have credit or ACH Terms)

1. Name			Terms
Account #	Phone	E-Mail	
2. Name			Terms
Account #	Phone	E-Mail	
3. Name			Terms
Account #	Phone	E-Mail	

BANK REFERENCE

Bank Name			
Bank City / State			
Bank Contact			Title
Account #	Phone	E-Mail	

TERMS & CONDITIONS

REQUIRED

All goods and merchandise are the property of Bill Hicks & Co., Ltd. until payment is made. A finance charge of up to 1.5% per month will be added to past due amounts. The undersigned acknowledges and understands all applications are subject to approval and acceptance. The undersigned submits this application for the purpose of obtaining credit. The undersigned authorizes Bill Hicks & Co., Ltd. to investigate the undersigned's credit record including references and statements and to report the performance of any obligation owed to Bill Hicks & Co., Ltd. to reporting agencies or other credit grantor. Returned checks and insufficient ACH shall be subject to a service charge of \$30.00. Returned checks and delinquencies will be reported into industry credit associations. Applicant agrees that failure to pay any invoice in full without the prior approval from Bill Hicks & Co., Ltd. Credit Department can result in cancellation of any credit terms offered under this agreement. Applicant further agrees that failure to pay any invoice in full within payment terms of the invoice can result in all open invoices becoming immediately due, regardless of terms. Applicant agrees that payment comes due immediately if purchaser becomes insolvent or bankrupt, discontinues business, or ownership of the business changes. Bill Hicks & Co., Ltd. reserves the right to alter or suspend credit at any time. If customer's account is referred to a collection agency or attorney for collection, customer agrees to pay all costs of collection including legal fees, collection fees, post-judgment interest and court costs. Applicant warrants that it maintains a distinct retail sales facility including stocking of inventory and is in compliance with all Federal, State, and local firearms, zoning, and related laws. The undersigned authorities release of ALL credit information requested by Bill Hicks & Co., Ltd.

1. NAME	SIGNATURE	DATE
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PERSONAL GUARANTEE

I/We, hereby personally guarantee payment of any and all indebtedness of applicant together with any costs of collection, including attorney's fees, court costs, post-judgment interest, disbursements and any other collection costs, including costs of any appeal. The undersigned hereby waives, to the extent permissible under the laws of the jurisdiction in which this guarantee is sought to be enforced, all presentment, dishonor and notice of protest. The undersigned guarantor(s) further agrees that this guarantee is continuing and that it shall remain in full force and effect as long as there is an outstanding balance owed by the applicant to Bill Hicks & Co., Ltd. The guarantor(s) further agree that Bill Hicks & Co., Ltd. may from time to time vary or adjust terms of sales and may agree to extend the due date on any invoice and that such variance or extension shall not operate to release guarantor(s). Guarantor(s) agree that this is a guarantee of payment and not of collection. The undersigned hereby waives any right to a homestead exemption or other exemption from execution on any judgment he/she or it may have under any state law. The invalidation of any part hereof shall not act as an invalidation of the whole hereof. All parts not invalidated shall be enforceable.

1. NAME	SIGNATURE	DATE
2. NAME	SIGNATURE	DATE

SECTION C: BLANKET AUTHORIZATION AGREEMENT FOR PRE-AUTHORIZED DEBIT(S) (ACH)

BANK INFORMATION

Name on Bank Account	
Bank Name	Phone
City / State / Zip	
Account #	9-Digit Routing #

INCLUDE COPY OF VOIDED CHECK ON SEPARATE PAPER

TERMS & CONDITIONS

REQUIRED There is no charge for customers with credit terms using our web site to pay their invoices via ACH. All goods and merchandise are the property of Bill Hicks & Co., Ltd. until payment is made. Returned ACH presentments or checks shall be subject to a service charge of \$30 and a finance charge of 1.5% per month on past due amounts. In the event customer's account is referred to a collection agency or attorney for collection, customer agrees to pay all costs of collection including legal fees, collection fees, post-judgment interest and court costs. *Applicant warrants that it maintains a distinct retail sales facility including stocking of inventory and is in compliance with all Federal, State, and Local firearms, zoning, and related laws.* The undersigned authorizes release of all credit information requested by Bill Hicks & Co., Ltd. This authority is to remain in full force and effect until Bill Hicks & Co., Ltd. and bank have received written notification of its termination from you. The written notification must be in such time and in such manner as to afford Bill Hicks & Co., Ltd. and bank a reasonable opportunity to act on it.

1. NAME	SIGNATURE	DATE
2. NAME	SIGNATURE	DATE

**ALL SIGNATURES REQUIRED FOR DRAFTS TO BANK ACCOUNT ARE REQUIRED.
YOUR SIGNATURE(S) VIA FAX INDICATES ADHERENCE TO THE TERMS AND CONDITIONS OF THIS AGREEMENT.**