



CUSTOMER ACCOUNT PACKAGE

GENERAL INFORMATION

Detroit Hitch Company is open to wholesale accounts only.
(Please do not refer retail customers)

HOURS 9:00 AM - 5:00 PM Monday through Friday (Earlier in season)

Shipping via our truck:

Orders will ship on the next scheduled delivery day unless specified.
We will accept add-ons until 10:30 AM day of delivery
Minimum order \$50.00 (Lesser orders may be shipped UPS at our discretion)

Shipping via UPS: orders placed by 3:00 PM will normally be shipped same day.

Customer pick-ups during business hours: please call in advance if possible.
Payment accepted by cash, credit card or company check only. (No personal checks)

Retail customer pick-ups will be accommodated if required for customers with **open accounts only**.
Retail customer must have a paid receipt. Only the items on the receipt will be delivered, no changes or additions will be allowed.

Prices are subject to change without notice.

Quotes will be canceled after 30 days.

Back ordered items will be shipped on the next scheduled delivery day after our receipt or canceled after 30 days unless otherwise specified.
(Customer may specify all back orders to be canceled)

Special orders: (Items not cataloged or specified as special order)
May not be canceled after 24 hours from ordering.
May not be returned unless defective.

Freight terms: Orders shipped via our trucks: no charge
UPS: No charge on orders over \$300.00 (Exceptions may be made due to weight or package count)
Bulk unboxed trailer hitches etc. and hazardous materials will carry an additional handling fee. Trailer hitches are \$5.00
Motor freight, or drop shipments are F.O.B. point of origin.

Brand names may be changed or substituted as availability or price dictates.

Return policy: Returned items must have prior approval. A return receipt will be sent with the next delivery. A credit memo will be issued or a replacement item will be shipped with the next order upon our receipt of the item returned.
Potential warranty items may be held pending approval of the vendor.
A restocking fee may be charged on non-defective items.
Non-defective items returned for credit must be new, never installed, and clean of markings and price labels.

ACCOUNT POLICY:

Eligibility:

A minimum activity of \$2000.00 per year is required to maintain an account. All accounts will be reviewed periodically to determine eligibility

Payment Terms:

- a. Open accounts, payment due 8th of the following month
- b. All others: C.O.D. or payment in advance
- c. Payment by cash or company check only (no personal checks)

Past due Account Status:

- a. Any Account for which payment is not received within 5 days of the due date will lose applicable

- discounts
- b. Any Account for which payment is not received within 23 days of the due date, will lose charging privileges:
 - i. Orders will be shipped C.O.D. only
 - ii. Past due accounts will be charged a 1.5% per month finance charge of the outstanding balance
 - c. Accounts that are past-due on a consistent basis may lose their charge privileges permanently at the discretion of the management of Detroit Hitch Company

On-Hold Status:

- a. Accounts where payment is not received within 53 days of the due date will be put on hold unless prior arrangements are made to make payments
- b. All orders for On-Hold accounts will be held till the account is paid off

Returned Checks:

- a. Checks returned to us by a bank for insufficient funds or any other reason will be charged back to the account and a service charge of \$25.00 will be charged to the account
- b. Checks returned after being deposited twice must be redeemed with cash or money order.
- c. Checks written on a closed account will be prosecuted.

WARRANTY POLICY

All items are warrantied by the manufacturer only and subject to the terms of their policies. Detroit Hitch Company will assist in processing claims, but assumes no liability whatsoever for warranties, guaranties or fitness of merchantability for any item.



651 Rochester Road Clawson, MI 48017-1729
Tel: 800-424-5232 * 248-583-4112
Fax: 248-589-5250

NEW ACCOUNT FORM

Business Name _____ DbA _____

Bill To: _____ Phone _____

Address _____ Fax _____

Sales Tax # _____ Contact: _____
Purchasing _____
A/P _____

Billing: Require Purchase Order: Per Order ___ Blanket _____

Send With Order: Invoice ___ Invoice Copy ___ Packing List: With Prices ___
Without Prices ___

Terms: 8th Prox ___ C.O.D. ___ Credit Card ___ Other (specify) _____

Ship To: _____ Phone _____

Address _____ Fax _____

Sales Tax # _____ Contact: _____
Purchasing _____
A/P _____

Location / Directions _____

Special Shipping Instructions: _____

Special Item Handling Instructions: _____

Location and Delivery Information

Specify:

One account with multiple ship to locations ___ Separate Accounts each location ___

LOCATION 1

Ship To: _____ Phone _____

Address _____ Fax _____

_____ Contact:
Purchasing _____

Sales Tax # _____ A/P _____

Location / Directions _____

Special Shipping Instructions: _____

Special Item Handling Instructions: _____

LOCATION 2

Ship To: _____ Phone _____

Address _____ Fax _____

_____ Contact:
Purchasing _____

Sales Tax # _____ A/P _____

Location / Directions _____

Special Shipping Instructions: _____

Special Item Handling Instructions: _____

LOCATION 3

Ship To: _____ Phone _____

Address _____ Fax _____

_____ Contact:
Purchasing _____

Sales Tax # _____ A/P _____

Location / Directions _____

Special Shipping Instructions: _____

Special Item Handling Instructions: _____



651 North Rochester Road, Clawson, MI 48017
(248) 583-4112 (800) 424-5232 FAX (248) 589-5250

APPLICATION FOR CREDIT

Date: _____
Company Name: _____
Address: _____
City, State, Zip: _____
Phone: _____ Fax: _____

You are a: Corporation _____/Sole-proprietorship _____/Partnership _____

Year started _____ Tax I.D. Number _____

Officers: President: _____
Vice-President: _____
Secretary/Treasurer: _____
Purchasing Agent: _____
Accounts Payable Manager: _____

References - Only supply names of those from whom you buy on a CHARGE basis.

Company Name: _____ Annual Purchases: \$ _____
Address: _____
Phone: _____ Fax: _____

Company Name: _____ Annual Purchases: \$ _____
Address: _____
Phone: _____ Fax: _____

Company Name: _____ Annual Purchases: \$ _____
Address: _____
Phone: _____ Fax: _____

Bank: _____ Manager: _____
Address: _____
Telephone: _____ Account #: _____

I hereby agree to pay reasonable collection costs, attorney fees, and court costs, if this creditor finds it necessary to use such means to collect a past due amount from this company. This is in addition to a 1.5% per month interest charge (18% per ANNUM). An account is past due if full payment is not postmarked by the 8th of the month following the shipping month.

I PERSONALLY GUARANTEE THIS ACCOUNT,

Signature _____ Witness _____

Print name & Title _____ Date _____

This information will be kept in strict confidence except as needed for verification purposes.

MICHIGAN SALES AND USE TAX CERTIFICATE OF EXEMPTION

This certificate is invalid unless all four sections are completed by the purchaser.

Section 1. Check one of the following:

- One time purchase
- Blanket certificate (1)

The purchaser hereby claims exemption on the purchase of tangible personal property and selected services made under this certificate from: Detroit Hitch Co. and certifies that this claim is based upon the purchaser's proposed use of the item or services, or the status of the purchaser.

Section 2. Items covered by this certificate:

- All items purchased
 - Limited to the following items
-

Section 3. Basis for exemption claim:

Resale

- At retail - Sales Tax Registration Number _____
 - At Wholesale - No Number Required
 - Agricultural Production: (Describe)
-

Industrial Processing

Non-Profit Organizations

- Government Entity, Non-profit School, Non-profit Hospital, and Church
(Circle type of organization)
 - Internal Revenue Code Section 501(c)(3) and 501(c)(4) Organizations
 - Exempt letter from the State of Michigan
 - Other (Explain)
-

Section 4. Certification:

I declare, under penalty of perjury, that the information on this certificate is true, that I have consulted the statutes, administrative rules, and other sources of law applicable to my exemption, and that I have exercised reasonable care in assuring that my claim of exemption is valid under Michigan law. In the event this claim is disallowed I accept full responsibility for the payment of tax, penalty, and any accrued interest, including, if necessary, reimbursement to the vendor for tax and accrued interest.

Purchaser _____ Street Address _____

City _____ State _____ Zip Code _____

Tel _____ Fax _____

Signature and Title

Date Signed

Name (Print or Type)

(1) A blanket certificate is valid for four years from date of signature unless an earlier expiration date is listed below:

Expiration date, if less than four years: _____

Return attention accounts receivable

Fax to: 248-589-5250

Mail to: Detroit Hitch Co.
651 Rochester Road
Clawson, MI 48017