

# YTC Summit International, Inc.

12037 Clark Street • Arcadia CA 91006 • USA  
Tel 626.359.4801 • Fax 626.359.8031  
www.ytcsummit.com • E-mail: sales@ytcsummit.com

# Catalog Request Form

|                                 |
|---------------------------------|
| Date:            /            / |
|---------------------------------|

**Our Catalog is Free! You just pay \$10.00 for Shipping and Handling for US Postal Service Priority Mail anywhere in the U.S.A.**

**\* Required Field or it will not be processed.**

Please Check Appropriate Catalog(s)    Gift Catalog    Houseware Catalog    Jewelry Catalog

\*Company Name (and DBAs if applicable): \_\_\_\_\_

\*Full Name of Contact Person: First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Title: \_\_\_\_\_

Alternate Contact Person: First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Title: \_\_\_\_\_

\*Billing Address: \_\_\_\_\_

\*City, State, Zip: \_\_\_\_\_

Shipping Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

\*Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Website: \_\_\_\_\_

Please check the appropriate box for payment Method:

CASH             CHECK             CREDIT CARD

CREDIT CARD TYPE:  AMERICAN EXPRESS    DISCOVER    MASTERCARD    VISA

PERSONAL CREDIT CARD             COMPANY CREDIT CARD

\*Account No:            -            -            -            \*3 OR 4 Digit Credit Card ID # \_\_\_\_\_

\*Expiration Date: \_\_\_\_\_            **Amount: \$10 per copy**

\*Cardholder Name: \_\_\_\_\_

\*Billing Address: \_\_\_\_\_

\*City, State, Zip: \_\_\_\_\_

\*Authorized Signature: \_\_\_\_\_ for the Authorization to charge this credit card

# YTC Summit International, Inc.

12037 Clark Street • Arcadia CA 91006 • USA  
Tel 626.359.4801 / 888.764.2846 • Fax 626.359.8031 / 888.245.4588  
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# Credit Application

Please type or print in black or blue ink.

Company Name (and DBAs if applicable): \_\_\_\_\_  
Billing Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Shipping Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Type of Ownership (Check One Only): Corporation \_\_\_\_\_, Partnership \_\_\_\_\_, Sole Proprietorship \_\_\_\_\_, Non-Profit Organization \_\_\_\_\_  
Principal Owners:  
\_\_\_\_\_  
Full Name Title Social Security No. DOB  
\_\_\_\_\_  
Full Name Title Social Security No. DOB  
In Business Since: \_\_\_\_\_  
Type of Business (Check One Only): Retail \_\_\_\_\_, Concession \_\_\_\_\_, Kiosk \_\_\_\_\_, Wholesaler/Distributor \_\_\_\_\_, Government \_\_\_\_\_  
If Chain Store, List Number of Stores: \_\_\_\_\_ Kind of Store (Gift Shop, Florist, etc.): \_\_\_\_\_

**THIS SECTION MUST BE COMPLETED FOR COD AND NET 30 ACCOUNTS.**  
Bank Name: \_\_\_\_\_  
Branch Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Checking Account No. \_\_\_\_\_ Savings Account No. \_\_\_\_\_

**YOU MUST LIST AT LEAST THREE TRADE REFERENCES.**  
(1) Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Account No. \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
(2) Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Account No. \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
(3) Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Account No. \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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# Credit Card Authorization



**PLEASE COMPLETE THE FOLLOWING INFORMATION IN BLACK INK AND RETURN TO US EITHER BY FAX OR MAIL:**

Bill To: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City St Zip: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**IF SHIPPING INFORMATION IS DIFFERENT FROM BILLING INFORMATION:**

Ship To: \_\_\_\_\_

Shipping Address: \_\_\_\_\_

City St Zip: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

For your convenience, YTC Summit International, Inc. will use this Credit Card Authorization to charge the following credit card account for all of your orders unless otherwise requested.

Also, by signing below, you agree to allow YTC Summit International, Inc. to charge the credit card provided below in the event that your account becomes past due.

Please check the appropriate boxes:

AMERICAN EXPRESS     DISCOVER     MASTERCARD     VISA

PERSONAL CREDIT CARD     COMPANY CREDIT CARD

Account No: \_\_\_\_\_ 3 OR 4 Digit Credit Card ID # \_\_\_\_\_  
*(See images below for ID location)*

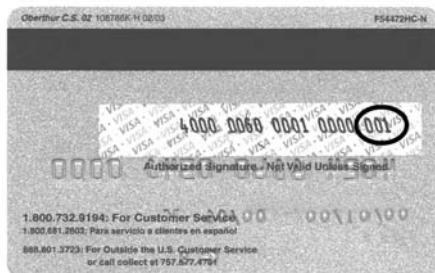
Expiration Date: \_\_\_\_\_ Cardholder Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

**VISA    MASTER CARD    DISCOVER**

**AMERICAN EXPRESS**





# Sales Tax Resale Certificate & Credit Agreement

I hereby certify,

that I hold valid Seller's Permit No. \_\_\_\_\_ issued pursuant to the Sales and Use Tax Law, I am engaged in the business of selling \_\_\_\_\_ that the tangible property described herein which I shall purchased from YTC Summit International Inc. will be resold by me in the form of tangible personal property; provided, however, that 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 the Retail Sales Tax Act to report and pay the tax, measured by the purchase price of such property. Description of property to be purchased: gifts.

In consideration of, and in order to induce you to establish an open account line of credit based on the foregoing application, the undersigned promises to pay for monthly purchases in accordance with your term of sales. If at any reason, the undersigned is unable to pay for monthly purchases when due, the undersigned agrees to pay and authorize you to bill my/our account, a service charge of 1.5% per month, from date of invoice or statement until paid. In the event it becomes necessary for your company to incur collection costs or institute suit to collect any amount due under this agreement, or any portion thereof, the undersigned promises to pay such additional collection costs, charges and expenses including reasonable attorney's fees if the account is placed in the hands of an attorney for collection.

It is hereby agreed that this contract has a special place for performances which is Arcadia, California and that it is to be paid in Arcadia, California, and that, therefore, any action filed to enforce this contract may be filed in, and heard in, the Judicial District nearest to Arcadia, California.

*This must be signed by corporate officer, partner, sole proprietor, or other authorized company employee.*

Company Name \_\_\_\_\_ Authorized Signature \_\_\_\_\_  
Date Signed \_\_\_\_\_ Print Name \_\_\_\_\_

## YTC SUMMIT INTERNATIONAL, INC. TERMS OF SALES:

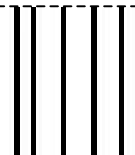


- \$100.00 minimum orders only.
- All sales are final. No consignment or guaranteed sales.
- All claims and/or returns must be approved and made no later than 15 days after receipt of order.
- All returned merchandise must be in its original box. No returns of worn or shelf-damaged items accepted.
- Merchandise returns for reasons other than our error are subject to 20% handling charge.
- YTC Summit will only give credit for merchandise received based on the original claim called into office.
- A 1.5% monthly finance charge will be billed on past due accounts.
- Customer is to pay all costs incurred in collecting past due accounts.
- The jurisdiction of any legal dispute will be Arcadia, CA.

I hereby certify, that I have read and completely understood the sales terms and conditions as listed above. By signing below, I agree to accept the above terms.

*This must be signed by corporate officer, partner, sole proprietor, or other authorized company employee.*

Company Name \_\_\_\_\_ Authorized Signature \_\_\_\_\_  
Date Signed \_\_\_\_\_ Print Name \_\_\_\_\_



**PLEASE  
PLACE  
STAMP  
HERE**

**YTC SUMMIT INTERNATIONAL, INC.  
12037 CLARK STREET  
ARCADIA, CA91006-5829**

