

Hose Box Inc New Customer Set-up Application

Please follow the instructions below to complete the New Customer Set-up Application.
We will process your application as quickly as possible. Contact Hose Box Sales with any application questions.

Return the completed application and customer contact form to sales@hosebox.com

Hose Box Standard Terms

- Standard payment terms are Credit Card. NET 30 terms considered. Hose Box welcomes our new customer applicants to order products on a Master Card, Discover, Visa, or American Express credit card.
- Drop Ship service is available.
- Product must be ordered in Hose Box standard pack quantities and packaging.
- Distributor direct-to-customer online orders must receive written Hose Box Inc. approval.
- Out of stock/short product/backorders – Hose Box policy is to ship all orders complete.
 - If partial orders and/ or backorders are accepted and/or expected, the application must indicate this (below).
 - In the event products are out of stock or delayed, all available products will be shipped as soon as possible. Remaining products will be shipped as a backorder once all are in stock.
- Defective or Damaged Goods:
 - Items must be returned to Hose Box for inspection by our Service Team.
 - Call to obtain an RMA number prior to returning any product.
 - Return freight cost paid by the customer.
 - Credit will be applied once an inspection is complete and approved.
- Returns:
 - All products being returned for credit must be returned in the original unopened standard pack in the master shipping carton and be received in new saleable condition.
 - Products returned due to overstock, lost sales, order error, undeliverable, and rejected and canceled shipments are subject to a 20% restock charge.
 - The customer is responsible for all freight expenses for returned product.
 - Disposition will be applied to actual quantities received. Hose Box will not be responsible for items or quantities returned that are not listed on the Return Authorization. Any product returned to Hose Box Inc. that is a non-Hose Box product will be disposed of.
- Distributorship may be revoked for not meeting Hose Box standard terms.
 - Hose Box offers Private Label Branding as a service to our dealers.
 - Interested in Co-Branding? ☐ Yes ☐ No

Please note that pricing is subject to change without notice.

- ☐ Collect – Freight will ship UPS Collect. UPS Collect Acct# _____ (must provide acct#)
- ☐ Prepaid/Add- Freight will ship UPS, and freight cost will be added to the invoice

Requested Ship Dates and Partial Shipments: Hose Box's policy is to ship orders complete. **(Select all that apply)**

- ☐ Customer will accept early shipments ☐ Customer will accept partial shipments ☐ Customer will accept backorder shipments.

Please note that if a requested ship date is not provided, the order will ship within 7 calendar days. (orders typically ship within 2-3 days)

Business Type: (Select 1 that best describes your business)

- ☐ Agriculture ☐ Automotive ☐ Contractor ☐ Government
☐ Hardware ☐ Hydraulic ☐ Industrial ☐ .COM Only
☐ Other: _____

Sells to: (Select all that apply) ☐ Distributors ☐ Resellers ☐ End-Users Other: _____

New Customer Application Checklist – please submit the following:

- ✓ Complete pages 1 and 2
✓ Attach required trade reference (minimum of 3)
✓ Sign and date document
✓ Include Routing Guide (if required)

*Completing this document does not guarantee approval. You will be notified if your terms are approved once all documentation has been completed and processed.

Authorized Signature

By my signature below, I acknowledge that I have completed this application to the best of my ability and that the information provided is accurate. In consideration of the extension of credit, I authorize Hose Box Inc. to contact the trade and bank references provided.
I agree to the terms outlined above.

Date:

Authorized Signature:

Title:

MAIL THE ABOVE COMPLETED FORM TO SALES@HOSEBOX.COM



Customer Contact Form

Return completed application and customer contact form to Hose Box.

sales@hosebox.com

Billing Information:

Company Name:	
Billing Address:	
City:	
State:	
Zip:	
Accts Payable Email:	
Main Email:	
Main Phone #:	

Shipping Information: ☐ check if same as above) *Please attach additional locations

Shipping Address:	
City:	
State:	
Zip:	
Shipping Email:	
Shipping Phone #:	

Buyer Contact:

Buyer Name:	
Direct Phone #:	
Email:	

Marketing/Advertising Contact: (Contact who receives all images, copy, features, logos, videos, ad materials, etc.)

Marketing Contact:	
Direct Phone #:	
Email:	

AP Contact: (For Invoicing)

AP Contact:	
Direct Phone #:	
Email:	

Additional Contacts:

Name:	Role:	Phone Number:	Email:



Helpful Contact Information:

[Dealer Access Portal @ hosebox.com](http://hosebox.com)

- Click on the Dealer Access Portal for:
 - a) Access to your account
 - b) Order status
 - c) Shipping Information
 - d) Account Balances and Payment Information
- Submit Purchase Orders to Sales:
 - sales@hosebox.com
- For price and availability or to check on the status of your order, email or call our Sales Department:
 - sales@hosebox.com OR (800)-592-3176
- For product images, features, videos, and ad materials, email Customer Service:
 - customerservice@hosebox.com
- For product inquiries and general questions, call or email Sales:
 - sales@hosebox.com OR (800)-592-3176
- For warranty inquiries or to return an item, email or call our Warranty Department:
 - warranty@hosebox.com OR (800)-592-3176

List Three Credit References:

Name: _____

Address: _____

Phone: _____ **Fax:** _____ **Email:** _____

Account Number: _____

Name: _____

Address: _____

Phone: _____ **Fax:** _____ **Email:** _____

Account Number: _____

Name: _____

Address: _____

Phone: _____ **Fax:** _____ **Email:** _____

Account Number: _____



Credit Card Authorization Form

Please complete all fields. You may cancel this authorization at any time by contacting us. This authorization will remain in effect until canceled.

Credit Card Information

Card Type: ☐ MasterCard ☐ VISA ☐ Discover ☐ American Express

Card Number: CVC Code:

Expiration Date (mm/yy):

Cardholder Billing Address:

Cardholder City, State and ZIP:

I, _____, authorize Hose Box Inc. to charge my credit card above for agreed upon purchases. I understand that my information will be saved on file for future transactions on my account.

Customer Signature

Date

Remittance Address:

Hose Box Inc.
P.O. Box 1231
Great Falls, MT 59403
admin@hosebox.com

Hose Box Inc.
2600 17th Street N.E.
Black Eagle, MT 59414 USA



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