



3800 GLOVER ROAD EASTON, PA. 18040
 610-258-3651
 800-221-6178
 FAX 610-258-7736

DEALER APPLICATION

Before you can place an order with Emery Distributors, an account must be established. When this application has been returned with both sides completed and pictures enclosed it will be processed. Processing generally takes a week depending on how cooperative the references are. Emery Distributors sells only to full time Hobby/Toy stores, or stores with legitimate Hobby departments. Emery Distributors defines a full time Hobby/Toy store as a permanent storefront location (not a home or flea market) that is open at least 30 hours a week and provides one or more people with full time employment. Include two photos of the store, one showing the outside storefront including adjacent building, the other showing the inside of the store. If the store is not a Hobby/Toy shop, the inside photo must be of the Hobby department. If these photos are not included or the application is not completely filled out, it will not be processed and an account will not be established. Photos are not required if your web site has pictures of your store.

Store Name _____

Address _____

Phone _____ Fax _____

Email _____

Web Site _____

Business Hours _____ Type of store: Full line Hobby(), Toy(), Other()

If other, explain _____

Lionel Value Added Dealer Yes() No()

Approximate square footage _____

Is this business a corporation(), partnership(), individual owner()

If corporation, name of corporation _____

Present Ownership since ____/____/____

State Tax Exemption Number _____

We want to ship by your preferred carrier. We ship via both UPS and FedEx depending on your preference, most of our customers prefer UPS but if you would rather be shipped via FedEx; check here ().

Names of Principals with home addresses and home phone numbers is required. If this is left blank it will be assumed that the store is in the home and an account will not be established.

1) _____

2) _____

3) _____

If you prefer to pay by credit card, check here () and sign below.

If you are seeking credit fill out the following reference section

REFERENCES--FILL OUT COMPLETELY

Company Name _____

Address _____

Fax or Email _____ Account Number _____

Company Name _____

Address _____

Fax or Email _____ Account Number _____

Company Name _____

Address _____

Fax or Email _____ Account Number _____

The undersigned agrees to pay interest at a rate of 1.5% per month (or the maximum rate permitted by law if less) in the event any amount owing by the undersigned to Emery Distributors, Inc. shall not be paid when due. Further if our account shall be turned over to an attorney or collection agency for collection, then we will pay, in addition to all amounts and interest due, all reasonable attorney's fees and collection expenses and charges incurred by Emery Distributors, Inc. to the extent permitted by law.

Signature _____ Date _____

Print Name _____ Title _____