

MODEL RECTIFIER CORPORATION

80 NEWFIELD AVENUE
EDISON, NEW JERSEY 08837-3817 USA

FAX: 732-225-0091
TEL: 732-225-2100

Dear Hobby Retailer:

First and foremost, we would like to thank you for choosing MRC. You will undoubtedly find that MRC products and services will meet your highest standards.

Our exclusive product lines available to dealers on a direct basis include **MRC Model Railroad Products, JTT Scenery Products, Model Power and Mantua Railroad Products, Clever Paper, MRC Super Brain Chargers. Academy, Easy Model and Gallery plastic model kits.**

MRC has expanded significantly over the past few years in order to service hobby shops more efficiently with more quality hobby product lines.

We are proud of our **Dealer-Direct** policies:

- Our Dealer-Direct pricing gives your business an advantage because every dealer has available the same price and terms. You can gain real profit with MRC pricing! We are your suppliers, **not your competitor.**
- **We back you with a powerful advertising campaign with non-stop advertising in leading publications and on the web. MRC creates the demand for the merchandise that brings the customers to your store.**
- Parts and dependable service are always available. Product literature and exploded views of our products are readily available upon request.
- Newsletters featuring special offers, technical advice and new product introductions are e-mailed to you directly.
- If you maintain our minimums, then freight for continental U.S. is paid by MRC.

For your convenience, we have an 800 number only for ordering: **1-800-333-3692**. We also have a telephone number for billing information or technical advice: **732-225-6144**.

If you have any questions please feel free to contact me. We are open from **8:30 AM to 6:00 PM Eastern Time.**

We look forward to doing business with you.

Sincerely,

Your MRC Marketing Representative

PLEASE BE ADVISED THAT MRC TRAIN PRODUCTS, ACADEMY PLASTICS, EASY MODEL, AND GALLERY MODELS ARE ALSO AVAILABLE THROUGH OUR BASE OF WHOLESALERS.

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CREDIT APPLICATION

Date: _____

Credit Limit Requested: _____

Company Information

Name: _____

DBA (if different): _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Fax #: _____

Federal Tax ID # or Social Security #: _____ Years In Business _____

Business Location: Downtown Mall: Home or Adjoining Building:

Other (explain): _____

Website Address: _____

E-Mail Address: _____

Type of Company: Single Proprietorship Partnership: Corporation:

Limited Liability Company: Other (specify):

State where incorporated _____ Number of employee _____

Business Hours: _____

Annual Retail Sales Volume: _____ Number of Stores: __ Original Owner: Y/N

Ownership Information

Please complete the below information for all officers, partners, members and owners. Please attach a separate sheet of paper if more space is required.

Name	Title	Ownership%	Home Address	Home Phone#

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Bank Reference

Name of Bank: _____ Bank Address: _____ Phone # _____
 Contact Name: _____ Account# _____ Type of Account : _____

PLEASE CHECK ALL THAT APPLY:

STORE FEATURES

- Slot track
- Train layout
- Race Track
- In-Store Videos

ADVERTISING

- Radio
- Newspaper
- Newsletter
- Promo
- Website

CATEGORY BREAKDOWN

- R/C Cars: ____%
- Simulators: ____%
- Slot Cars: ____%
- R/C Planes: ____%
- R/C Boats: ____%
- R/C Heli: ____%
- Railroad: ____%
- Plastics: ____%
- Diecast: ____%

Total: 100%

PROMOTIONS

- Demonstration
- Classes
- Sponsored Events

Mortgage Holder / Landlord Information

Do you rent or own premises that the business occupies? _____ Years at location: _____	
Mortgage Holder/Landlord Name : _____	Contact Person : _____
Address : _____	Phone # : _____

1. Has the company or any officer, partner, member, or owner ever filed for bankruptcy? Yes/No (if yes attach detail)

2. Has your company or any company that any officer, partner, member or owner been associated with an officer, partner, member or owner ever had credit with us before? Yes/No (if yes under what name _____)

By signing below, I certify that I have the authority to bind the company to this agreement, and that I agree to creditor's terms of sale of _____, I also agree and accept that the credit limit and credit terms maybe changed or withdrawn at the sole discretion of the creditor.

The information given herein is offered as part of request by the applicant for an extension of credit for commercial business use. The information provided is presented by the applicant to be true, correct and complete. The Applicant authorizes Creditors to investigate all credit references and others sources pertaining to our credit and financial responsibility. The undersigned authorizes its banks and trade creditors to provide Creditors with complete information for the purpose of credit evaluation. The applicant understands that all past due balances will be subject to a _____ per month finance charge. The applicant further agrees to pay a _____ collection charge in the event of default, if the account is placed with a collection agency or attorney.

Applicant Company Name: _____

Signature: _____ Title: _____ Date: _____

Print Name: _____

Personal Guarantee

In consideration of any credit extended, the undersigned will personally guarantee full and prompt payment of all indebtedness of _____ owed to _____. This personal guarantee shall remain in force until its revocation is received by certified mail to the address and attention of _____. Revocation shall not affect indebtedness incurred prior to receipt of written notice. [Kentucky resident – if Guarantor is a resident of the Commonwealth of Kentucky, this guaranty shall be limited to amount not exceeding \$_____ for a duration of not more than _____ years from the date it is signed.]

Signature: _____ Date: _____

Print Name: _____ Social Security Number: _____

At least three (3) credit references must be supplied along with their complete address and method of payment. If you do not have three credit references, please state this on the application:

PRESENTLY BUYING FROM THE FOLLOWING HOBBY SUPPLIERS:

1. Name: _____
Payment Method: C.O.D.: ___ Open: ___ C/C: ___ Account #: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax #: _____

2. Name: _____
Payment Method: C.O.D.: ___ Open: ___ C/C: ___ Account #: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax #: _____

3. Name: _____
Payment Method: C.O.D.: ___ Open: ___ C/C: ___ Account #: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax #: _____

4. Name: _____
Payment Method C.O.D.: ___ Open: ___ Account #: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax #: _____

5. Name: _____
Payment Method C.O.D.: ___ Open: ___ Account #: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax #: _____

6. Name: _____
Payment Method C.O.D.: ___ Open: ___ Account #: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax #: _____

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I hereby acknowledge that the above information is accurate and that any merchandise purchased from Model Rectifier Corporation will be for resale use only.

I understand that placing an order with Model Rectifier Corporation constitutes doing business in the state of New Jersey and is therefore subject to the laws of the State of New Jersey.

Should credit be granted by Model Rectifier Corporation, all decisions with respect to the extension or continuation shall be at the sole discretion of Model Rectifier Corporation. I understand that I may terminate my credit availability at my discretion at any time.

I agree to pay the net total before cash discount of any invoice that is not paid within terms. I acknowledge that if payment is not made within 30 days of invoice date that a finance charge may be added to my account. Any finance charge added will be determined by applying a 1.5% per month rate on the average monthly balance (18.0% Annual Percentage Rate) to the account.

I understand that it is my responsibility to give notification to Model Rectifier Corporation prior to any change in ownership, change of address or an intended date to cease operation.

In the event that the account becomes delinquent and is turned over to any collection agency or attorney for collection, I agree to pay collection fees and/or attorney fees not exceeding 30% of the past due balance plus court costs, serving costs and/or any miscellaneous expenses incurred as a result of my failure to pay.

I authorize Model Rectifier Corporation to make any credit inquiries that it finds necessary in connection with this credit application or in the course of review or collection of any credit extended in reliance to this application. I authorize any credit reporting agency to compile and furnish any information that it may have to obtain a response to such credit inquiries and agree that such information along with this application shall remain the property of Model Rectifier Corporation whether or not credit is extended.

I hereby personally guarantee any indebtedness to Model Rectifier Corporation incurred by

(Business Name)

(Individual Guarantor/ Owner)

(Position)

(Date)

(Individual Guarantor/ Owner)

(Position)

(Date)

Forms must be filled out completely, signed and dated.

****A storefront photo and photocopy of your retail sales certificate must be sent with these forms.**

All businesses applying to become a dealer must have publicly listed phone numbers.**

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US MAIL/ PARCEL POST CLAIMS RELEASE

DATE: _____

I understand and acknowledge that US Mail/ Parcel Post claims may take over a year to resolve and hereby release Model Rectifier Corporation from liability as this is not a guaranteed shipment method.

In the event I request a shipment via US Mail/ Parcel Post I will take full responsibility for payment to Model Rectifier Corporation even if the shipment is misdirected, lost or damaged in transit. I understand that my account will be adjusted as soon as the claim has been settled.

(Signature)

(Store Name)

(Store Address)

(City, State & Zip)