



## Credit Services

Thank you for your interest in the products of Paper Systems Inc. Please fill out the 5 page credit application and email it back to [marketing@papersystems.com](mailto:marketing@papersystems.com)

Business Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

### Monthly Dollar Volume

The monthly purchase volume your company expects to place with PSI: \$ \_\_\_\_\_

### Payment Terms

**Open Terms:** All decisions with respect to the extension or continuation of open terms to a customer shall be in the sole discretion of PSI. Upon credit approval, PSI's standard terms are Net 30 Days. The payment period is based on the invoice date. PSI reserves the right to hold shipments if an account is past due. Also, should PSI consider that account's balance has become too large, PSI reserves the right to hold shipments whether or not any invoices are past due.

**Prepayment:** PSI reserves the right to require prepayment on specially made items. As a convenience for customers and to expedite order processing, PSI accepts all major credit cards in prepayment.

**Cash-on-Delivery:** PSI does not accept COD orders.

**Returned checks:** There is a \$35.00 charge for each return. PSI does not re-deposit return checks. Repayment must be made by money order and include the return check charge.

### Application for Credit

The undersigned certifies that he/she is authorized to act in behalf of the company named above. He/she also certifies to the best of his/her knowledge and belief that the information provided as 'Credit Information' and 'Customer Information' is true and correct and that the business entity named on this application is financially able to meet any commitments made with Paper Systems Incorporated (PSI). Further, the undersigned authorizes PSI to obtain credit information and to verify and/or supplement the information provided. Finally, the undersigned has read and accepts Paper Systems Incorporated payment terms.

Signature: \_\_\_\_\_  
Printed Name of Signer: \_\_\_\_\_  
Title of signer: \_\_\_\_\_ Date: \_\_\_\_\_

Effective date 7/20/2011



Credit Services

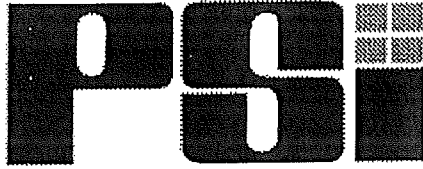
Business Name: \_\_\_\_\_

Customer Information

1. Billing Information (Leave 1a blank if same address as on page 1)
1a. Billing Address: \_\_\_\_\_
City: \_\_\_\_\_
State: \_\_\_\_\_ Zip (+4) \_\_\_\_\_
1b. Email Address to send invoices \_\_\_\_\_
1c. Monthly Statements? Yes No
1d. State & Local Sales/Use Tax: Exempt? Yes \* No
\*Exempt Florida Businesses, please attach a copy of your current year 'Annual Resale Certificate'.
\*Exempt New York businesses, please attach a Resale Certificate to this form.
\*Exempt Businesses in Ohio, please attach your state's sales/use tax Exemption Certificate.

2. Contact Information (Leave phone information blank in b and c, if the same as in a.)
2a. General
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_
Web Address: \_\_\_\_\_
2b. Purchasing Contact: \_\_\_\_\_ Ext. \_\_\_\_\_
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_
E-mail: \_\_\_\_\_
2c. Accounts Payable Contact: \_\_\_\_\_ Ext. \_\_\_\_\_
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_
E-mail: \_\_\_\_\_

3. Business Information
3a. Year Business was established: \_\_\_\_\_ 3b. No. of Employees: \_\_\_\_\_
3c. Type of Business: \_\_\_\_\_
3d. Legal Structure: Individual / Proprietorship Partnership
Corporation Type: \_\_\_\_\_
3e. Legal name if different from business name: \_\_\_\_\_
3f. Taxpayer Identification #: \_\_\_\_\_
3g. Principals:
Name Title
1 \_\_\_\_\_
2 \_\_\_\_\_
3 \_\_\_\_\_
4 \_\_\_\_\_



Credit Services

Business Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

**Information Release Authorization**

Our company has released bank information to Paper Systems Incorporated (PSI) for the purpose of establishing credit terms and authorizes the bank to release information in response to PSI's attached inquiry

Signature: \_\_\_\_\_  
Printed Name of Signer: \_\_\_\_\_  
Title of signer: \_\_\_\_\_ Date: \_\_\_\_\_



**Credit Services**

**Business Name:** \_\_\_\_\_

We, at PSI, look forward to serving you. In order to assure you have satisfactory experience, please answer the following:

**Special Labeling**

Do you require special labeling ? Circle **Yes** or **No** If yes, please specify below or attach information on labeling requirements:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Special Handling**

Do you have a Routing Guide? Circle **Yes** or **No** If yes please attach a copy

Do you require Delivery Appointments? Circle **Yes** or **No** If yes, please provide an appointment number for each location. If you have more locations, please attach a separate sheet.

Location

Phone Number

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other Shipping Requirement:

Do you require Liftegate Services? Circle **Yes** or **No**

Do you require Inside Delivery? Circle **Yes** or **No**

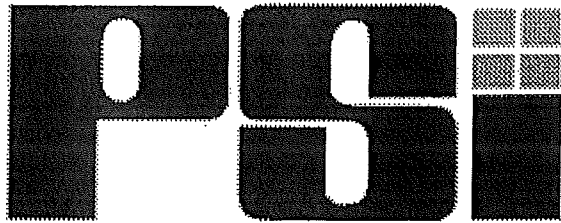
Do you have a Dock? Circle **Yes** or **No**

Do you require Residential Delivery? Circle **Yes** or **No**

Do you have other handling requirments we should be aware of ? Circle **Yes** or **No**

If yes, please specify below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**Credit Services**

Business Name: \_\_\_\_\_

Use your company's credit information sheet in place of this page or use space below to provide credit references.

**Credit information**

**Bank Reference**

Bank Name:	Acct #:
Address:	
City:	ST:                      Zip:
Telephone:	Fax:

**Trade References**

Please provide vendors that are suppliers for your business, such as manufacturers, warehouse, or distributors.

Vendor # 1	Acct #:
Address:	
City:	ST:                      Zip:
Email:	
Telephone:	Fax:

Vendor # 2	Acct #:
Address:	
City:	ST:                      Zip:
Email:	
Telephone:	Fax:

Vendor # 3	Acct #:
Address:	
City:	ST:                      Zip:
Email:	
Telephone:	Fax:

Vendor # 4	Acct #:
Address:	
City:	ST:                      Zip:
Email:	
Telephone:	Fax:



# TERMS AND CONDITIONS

Effective Date: September 2018

PAPER SYSTEMS INCORPORATED  
P.O. Box 150, 185 S. Pioneer Boulevard  
Springboro, Ohio 45066

**WARRANTY:** All products are guaranteed for materials used and workmanship. All products are guaranteed to meet the performance specifications of equipment for which they are designed. **LIMITATION OF LIABILITY:** Paper Systems Incorporated (hereafter referred to as PSI) warrants to the buyer and only to the buyer that the goods will be produced within normally accepted tolerances, free of defects in workmanship and material, to either PSI specifications or, on specially made orders, the buyer's specifications. In no case will PSI's liability exceed the actual cost of the goods purchased. PSI will not be liable for any consequential damages, loss, or expense arising by reason of its acceptance or fulfillment of orders.

**FOOTAGES / DIAMETER:** All footages listed in the Catalog and price lists are approximate and run to industry  $\pm$  standards. The diameter of the roll is approximate and will vary with the thickness of paper, size of cores, and other factors involved in the production of paper rolls.

**SPECIFICATIONS:** The specifications included in our catalog are basically provided by equipment manufacturers and dealers. We cannot guarantee the accuracy.

**PRODUCT AVAILABILITY:** PSI's "Top 20" items will ship within 48 hrs. Approved orders of in-stock items ship within three (3) working days. Out-of-stock and printed exact repeat items ship within ten (10) working days. First time printed rolls are shipped four (4) weeks after final artwork is approved.

**SPECIAL ITEMS:** All special orders are to be confirmed in writing. Prepayment may be required. NO RETURNS on non-stock items will be authorized unless defective in workmanship and/or material.

**Printed rolls:** Customers must provide PSI with approved camera ready artwork (black and white) or compatible digital media and submit sample of previous order. The customer must proof read and approve all negatives or proofs before going to press. The manufacturer's sole responsibility is to correct its own product. A one time charge for printing plates will be added to the first order. All orders are subject to a 10% plus or minus variance on cases shipped. See our printed price list on selected rolls or contact a PSI representative for a quotation. Ten (10) case minimum. Printed orders are priced F.O.B. Ohio plant unless otherwise specified.

**Colored paper:** In addition to white, 15# Bond paper is available in goldenrod, canary, pink, or green. Minimum order required per color/item is five (5) cases, plus a \$50.00 slitter setup charge. Please call for pricing.

**Custom plain rolls:** PSI has a five (5) case minimum and a \$50.00 setup charge on any quantity of custom non-printed paper rolls. These products are designated with an (\*) asterisk in the price list. Custom, by general definition, is any item that we do not have in stock, is not listed as stock on the price list, special products, or changes to a stock item that requires different footage, paper, packaging and the like. These products are not returnable if produced to specification. All custom plain orders are subject to a 10% plus or minus variance in cases ordered in full case quantity.

**UPS/FEDEX SHIPMENTS:** There is a minimum per order handling charge of \$4.95 that is added to all orders that are shipped UPS, FEDEX or other small package carrier.

**PRICING:** Prices are F.O.B. plant unless otherwise specified. If delivered pricing is needed, call for a quote. Delivery charges will apply to quantity ordered from each plant. All prices are subject to change without notice and will be billed at the price prevailing at time of shipment.

**FREIGHT TERMS:** All prices are F.O.B from producing PSI plant. Freight is prepaid and added to the invoice. (Inside delivery, lift gate, and fuel surcharge costs are extra.)

**TAXES:** Prices do not include sales, use, excise or other taxes. PSI is required to collect sales taxes in Florida and Ohio. PSI must have an appropriate tax exemption form on file for deliveries in these states; otherwise, sales tax will be added to invoices.

## PAYMENT TERMS

**Remit To:** PO Box 150, Springboro, OH 45066-0150

**U.S. Customers-Initial Orders:** Prepayment may be required on first time orders, except when open terms have been approved prior to order placement. PSI accepts all major credit cards as a prepayment option.

**U.S. Customers-Cash-on-Delivery Orders:** PSI does not accept COD orders.

**U.S. Customers-Extension of Terms and Account Dollar Volume:** PSI's standard terms are **NET 30 DAYS** upon credit approval. The payment period is determined by the invoice date. All decisions with respect to the extension or continuation of open terms to a customer shall be in the sole discretion of PSI. PSI reserves the right to hold shipments, if a customer's account is past due. Further, PSI reserves the right to hold shipments should PSI consider that an account's balance has become too large, whether or not any invoices are past terms. PSI also reserves the right to require prepayment on specially made items.

**International Customers:** Orders must be prepaid in U.S. dollars. PSI reserves the right to require pre-payment by wire transfer.

**Returned Checks:** There is a \$35.00 charge for returned checks. Returned checks will not be re-deposited. Repayments must be made by certified check and include the returned check charge.

**Credit Cards:** PSI accepts Visa, MasterCard, Discover, and American Express as prepayment options. Credit card numbers are **not** kept on file except when a customer provides written consent for PSI to do so. Customers on open terms, who wish to use a credit card as a payment method, need to contact PSI Customer Service for credit card payment agreement form.

**CLAIMS:** Title to goods is passed to purchaser upon transfer of the Bill of Lading to the carrier. The customer must note on the delivery receipt any shortages or damages. PSI will not make adjustments without delivery receipt verification. It is the customer's responsibility to initiate claims against the carrier when they select the carrier.

**RETURNED GOODS POLICY:** No returns will be authorized or accepted unless prior approval has been granted by PSI. All returns must be assigned a PSI Return Authorization Number and a freight assignment. Disposition of freight charges will be determined at the time of the request for return. Only full cartons will be accepted for return, and only goods invoiced within 90 days will be considered for return. No obsolete goods may be returned. No special items may be returned unless defective in workmanship and/or material. Request for return of stock items ordered in error must be made within 30 days of the invoice. Returned merchandise is subject to a 20% restocking fee.

**CANCELLED/CHANGE ORDER POLICY:** Cancelled orders require compensation for cost incurred up to the point of order cancellation. Changed orders may also require compensation for cost incurred up to the point of the change. These costs may include special materials ordered and/or processed as well as any labor cost incurred up to the point of cancellation or change.

Call Customer Service if you have any questions 1-888-564-6774.

PSI is an Equal Opportunity Affirmative Action Employer.