



Maui Jim USA, Inc

NEW ACCOUNT CREDIT APPLICATION

Need some assistance, contact us:

Mainland
One Aloha Lane
Peoria, IL 61615
Phone 888-628-4546 or 309-691-3700
Fax 800-516-5160 or 309-692-6719

Hawaii
930 Waihee St. Suite 9
Lahaina, HI 96761
Phone 800-848-3644 or 808-661-8841
Fax 800-638-0351 or 808-661-0351

ACCOUNT BILLING INFORMATION

Legal Company Name
Bill to Address
City
Country
Duns#
Principal's Name
Principal's Email
Principal's Phone
Principal's Fax
Accounts Payable's Name
Accounts Payable's Email
Accounts Payable's Phone
Accounts Payable's Fax
Buyer's Name
Buyer's Email
Buyer's Phone
Buyer's Fax

BUSINESS INFORMATION / HISTORY

Years In Business
Annual Revenue
Company Website if applicable
# of Locations
Location Sq Footage (estimated)
# of Employees

SHIPPING ADDRESS

Company Name, d/b/a/ or Tradestyle
Address
Address 2 / PO Box
City
State
Zip
Country

BANK REFERENCE

Bank Name
Address / City / State / Zip
Phone

TRADE REFERENCES

Name of Reference
Address / City / State / Zip
Phone

PAYMENT OPTIONS

1% Auto Pay Discount Program (ACH Debit Only)
Maui Jim is offering a 1% discount for any account who signs up for automatic ACH Direct Debit bill pay.
Routing Number
Bank Account Number
Bank Name
Swift Code

Auto Pay with Credit Card
We would like to pay our net amount due for the month with a credit card. Maui Jim accepts Visa, MasterCard, Discover and American Express.

Credit Card Number
Expiration Date
CSV Security Code

Please provide an email address to receive your statement, invoice and credit memo copies electronically.

Checks should be remitted to: Maui Jim USA, Inc 6534 Eagle Way, Chicago, IL 60678-1065

ACCOUNT PROFILE INFORMATION

Primary Channel Of Trade (check one that most applies)
Sunglass Specialty
Optical
Sport Specialty
Golf
Beach / Surf
Ski (Winter Sports)
Tennis
Hotel / Resort
Fishing
Other

Upon acceptance of this application, applicant agrees to make payment(s) in accordance with the terms and conditions of Maui Jim, and agrees to pay the full non-discounted amount on any invoice to which full and timely payment is not made.

Signature of Authorized Applicant
Date
Print Name & Title
Maui Jim / Zeal Sales Executive