



Plastic Fasteners Distributors
 195 Holcombe Branch Road
 Weaverville, NC 28787
 828.626.2773 (O) 828.694-0654 (F)
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EXTENDED PAY OPTIONS APPLICATION

DATE: _____

COMPANY: _____ CUSTOMER #: _____

EXTENDED PAY PERIOD INVOICES SHALL NOT EXCEED \$500. LARGER INVOICES REQUIRE PRE-APPROVAL – BASED UPON PAST PAYMENT HISTORY (AT LEAST 3 INVOICES WITHIN 90 DAYS . A MAINTENANCE FEE IS BILLED PER EACH INVOICE POSTED.

WE, the company stated above, APPLY FOR EXTENDED PAY OPTIONS BELOW TO Plastic Fasteners Distributors FOR THE REASONS STATED. WE UNDERSTAND THAT AN ADDITIONAL ACCOUNTING MAINTENANCE FEE IS APPLIED TO CARRY THIS ACCOUNT BEYOND THE NORMAL 10-DAY PAY PERIOD (as shown with the extended pay period options) AND AGREE TO PAY ANY CHARGES AS APPLIED. “DUE DATE” IS REFERENCED AS THE “DATE RECEIVED” IN THE PFD OFFICE FOR PROCESSING – “NOT CHECK WRITTEN DATE”. _____ (init)

WE UNDERSTAND THAT FOR A ‘MULTI-SCHEDULED RELEASED AGREEMENT, THAT ALL INVOICES MUST BE PRE-PAID AND THAT THE FIRST PRE-PAID INVOICE WILL INCLUDE TWO (2) MONTHS OF SHIPMENTS IN ADVANCE TO PREVENT ANY POSSIBLE DELAYS IN SHIPMENTS – SHOULD A REGULAR PAYMENT BE DELAYED IN THE MAIL. AND, WE UNDERSTAND THAT ADDITIONAL INVOICES FOR MULTIPLE SHIPMENTS WILL BE INVOICED IN ADVANCE AT THE FIRST OF EACH MONTH FOR ANY SHIPMENTS WITHIN THAT MONTH AND MUST BE PAID BY THE DUE DATE OF THE INVOICE (WITHIN THE PAY PERIOD BELOW – IF APPROVED) TO AVOID ADDITIONAL ACCOUNTING FEES AND CHARGES. (ANY ADJUSTMENTS FOR THE LAST MONTH OF SHIPMENTS WILL BE CALCULATED IN FOR THE LAST PRE-PAID INVOICE – ALLOWING FOR A ZERO BALANCE DUE FOR THAT MONTH BEING SHIPPED.)

10-DAY PAY PERIOD (Normal - No maintenance charge)

15-DAY PAY PERIOD (\$10/per invoice maintenance charge)

REASON REQUESTED: _____

30-DAY PAY PERIOD (\$15/per invoice maintenance charge)

REASON(s) REQUESTED: _____

I have read the Financial Disclaimer Form of Plastic Fasteners and this agreement form and, by signing below, do fully agree with and promise to pay ALL incurred charges and any additional financial charges by the Invoice Due Date should they be added to this account. Should payments be withheld for any reason, no exceptions allowed, all penalties and any additional charges become due and are promised to be paid in FULL by printed Due Dates - by signing this form:

Agreed to and signed: _____

Signature

Printed Name

Position in Company: _____

Date: _____