

RETAIL CUSTOMER APPLICATION

For Internal Use
Only

Customer Account
#

SECTION A: APPLICANT INFORMATION

The Legal Business and/or DBA or Trade name refers to the "Applicant"

Are you registered with the Jewelers Board of Trade?	☐ Yes ☐ No	Registered Business Address	
JBT # (if selected yes above)		City, State, Zip	
Legal Business Name			
DBA or Trade Name		Ship-to Address (if different)	
Phone		City, State, Zip	
Fax	A/P Contact		
Email	A/P Email		

SECTION B: BUSINESS INFORMATION

Business Type (select one)	☐ Sole proprietorship	Federal Tax ID Number	
	☐ Partnership	State of Incorporation/Formation	
	☐ Corporation	Business location is (select one)	☐ Owned ☐ Leased
Description of Business		In business since (m/d/y)	
		At address above since (m/d/y)	

List the requested information for all owners, partners, members, officers, and directors associated with "Applicant"

Full Name	Title	Home Address	Email	Telephone #	Social Security #

SECTION C: BANK INFORMATION

Bank		Type of Account (s)	
Bank Address		Account # (s)	
City, State ZIP Code		Type of Loan(s)	
		Loan Amount(s)	
Contact at Bank		Collateral Securing Loan(s)	

SECTION D: TRADE REFERENCES

Check boxes to indicate your major suppliers (min 5 suggested). Use "Additional References" below, if necessary.

- | | | | | |
|--|---|--|--|--------------------------------------|
| ☐ A. Jaffe/Firestar | ☐ Bulova Watch | ☐ Citizen Watch | ☐ Gabriel Bros. | ☐ LVMH |
| ☐ Movado | ☐ Richline | ☐ Rolex Watch | ☐ Royal Chain | ☐ Seiko Corp. |
| ☐ Yurman | ☐ Stuller Settings | ☐ Royal Chain | ☐ Verragio | |

Additional Trade References

Company Name	Address	Telephone

SECTION E: MARKETING AND SALES CONTACT INFORMATION

Website URL				Facebook URL	
Instagram Tag (@)				Other (specify)	

Indicate employee names and contact below for store managers, marketers, buyers, etc.

This information will be used to coordinate marketing and sales items with your company and to keep you informed of Frederick Goldman Inc. events and offerings through email. By providing the contacts below you are affirming that these email addresses are owned by Applicant and are not the personal email addresses of your employees.

Full Name	Role (choose one)	Title	Tel #	Email
	☐ Marketing ☐ Buyer ☐ Store Mgr.			
	☐ Marketing ☐ Buyer ☐ Store Mgr.			
	☐ Marketing ☐ Buyer ☐ Store Mgr.			
	☐ Marketing ☐ Buyer ☐ Store Mgr.			
	☐ Marketing ☐ Buyer ☐ Store Mgr.			

SECTION F: AGREEMENT

Terms: Subject to Home Office Approval – C.O.D. restrictions may be placed on any past due account. All invoices are due Net 30 days.

I hereby affirm that the above information is true to the best of my knowledge. I authorize Frederick Goldman Inc., to make the inquiries to the above references for the purpose of determining credit worthiness.

SECTION G: SIGNATURES

To be signed by Proprietor(s), Partner(s), or Corporate Officer(s) Only

Signature		Signature	
Name		Name	
Title		Title	
Date		Date	

ANTI-MONEY LAUNDERING DATA SHEET

US PATRIOT ACT

Is your company a member of LBMA, RJC or any similar international organization?

Yes____, No ____

Is your company CTPAT certified?

Yes ____, No ____

Are you a “dealer”, as defined under the U.S. Department of Treasury’s Financial Crimes Enforcement Network (FinCEN) Anti-Money Laundering Regulations; FinCEN defines “dealers” as *a person or entity operating or doing business in the United States that, within the preceding year, both purchases and sells at least \$50,000 worth of jewels, precious metals, or precious stones.*

Yes____, No ____

Have you instituted an Anti-Money laundering program in accordance with the requirements of the U.S. Patriot Act and applicable regulations?

Yes____, No ____

Due Diligence

Has your company established a due diligence process to identify its business partners?

Yes____, No ____

Does your company have a process to identify each transaction and each supplier to your company?

Yes____, No ____

Has your company or Senior Management ever been charged for a violation of applicable anti-bribery laws or regulations?

Yes____, No ____

Directors/Partners of the Company_____

Owners of the Company (if different from above) _____

I certify that the above information is accurate.

Name (Printed)

Title (Printed)

Signature

Date

PLEASE PRINT, SIGN, AND SUBMIT VIA FAX OR SCANNED EMAIL COPY. DO NOT SIGN DIGITALLY.