

2025 Castelli USA Dealer Application Checklist

- Completed application with signature(s)
- PDF of resale certificates for all locations (No pictures please)
- Terms requested on page 1
- Opening order in place with sales representative
- ACH form filled out with voided check (If applicable)

Please email sales@castelli-us.com with any questions.

2025 Castelli USA Dealer Application

Please scan & email completed Dealer Application and Resale Certificate to:
sales@castelli-us.com.

To avoid delays, Resale Certificate must be filled out ENTIRELY by Customer. Castelli cannot complete or modify your form for you. Any incomplete forms will be returned to you to complete.

Once Castelli USA receives both completed forms, please allow 2 - 3 business days for processing.

For any questions, please email: sales@castelli-us.com or call Inline Sales at: (503) 222-3500 x: 4

Business Information

Date Submitted:

Terms Requested (Select One): Credit Card | ACH | COD | N30/CC | Net30/ACH | Net 30 (See page 7 for explanation)

Preferred Business Name on Account:

Legal Name:

Website:

Billing St. Address:

City, State, Zip:

Business Structure (Select One): Sole Proprietor | General Partner | LLC | LLP | Corporation

Sales Tax ID Number*:

*Please include a copy of your Resale Certificate for EACH ship to location.

Contact Information

Owner Info

Owner's Name:

Phone:

Home St. Address:

City, State, Zip:

Owner's Email Address:

2nd Owner's Name:

Phone:

Home St. Address:

City, State, Zip:

Owner's Email Address:

Billing Contact

Billing Contact Name:

Phone:

Billing's Email Address:

Store Location:



Business Shipping Addresses

Location #1

Store Location Name:

Street Address:

City, State, Zip:

Buyer's Name:

Phone:

Home St. Address:

Buyer's Email Address:

Shop Phone if different than buyer's:

Location #2

Store Location Name:

Street Address:

City, State, Zip:

Buyer's Name:

Phone:

Home St. Address:

Buyer's Email Address:

Shop Phone if different than buyer's:

Location #3

Store Location Name:

Street Address:

City, State, Zip:

Buyer's Name:

Phone:

Home St. Address:

Buyer's Email Address:

Shop Phone if different than buyer's:

Location #4

Store Location Name:

Street Address:

City, State, Zip:

Buyer's Name:

Phone:

Home St. Address:

Buyer's Email Address:

Shop Phone if different than buyer's:

Trade Credit References

Reference #1

Company Name:	Account #:
City, State, Zip:	Terms/Credit Limit:
Contact Name:	Phone:

Reference #2

Company Name:	Account #:
City, State, Zip:	Terms/Credit Limit:
Contact Name:	Phone:

Reference #3

Company Name:	Account #:
City, State, Zip:	Terms/Credit Limit:
Contact Name:	Phone:

Banking Information

Banking Name:	
City, State:	Account #:
Contact Name:	Phone:

Shop Overview

Annual Gross Sales:	Own Or Rent:
Sq. Ft. (Main location) :	# of locations:
Number of Employees:	Years In Business:



Personal Guarantee

If this application for credit is approved, by signing this credit application, I hereby personally guarantee and agree to pay all account balances due to MVC USA, LLC dba Castelli USA according to the terms set forth on the invoices. If such monies are not paid within the terms set forth on the invoice, I personally guarantee and agree to pay interest on the outstanding balance, computed at 18% per annum until the account is paid in full, including but not limited to attorney's fees, court costs, and all other costs of collections.

Guarantor #1

Guarantor Signature:

Print Name:

Date Signed:

Home St. Address:

City, State, Zip:

Guarantor #2

Guarantor Signature:

Print Name:

Date Signed:

Home St. Address:

City, State, Zip:

Guarantor #3

Guarantor Signature:

Print Name:

Date Signed:

Home St. Address:

City, State, Zip:

Conditions of Sale

Timely Payment

The undersigned agrees to pay all purchases in accordance with the conditions of sale as outlined below, as outlined in each season's sales program guidelines, and per the terms stated on the invoice. All invoices will be paid promptly. Payment is considered late when not received by Castelli USA on or before the due date.

Inspection Upon Receipt of Goods

The undersigned agrees the Dealer is responsible for inspecting the contents of all shipments to assure the order meets specifications. Castelli USA must be notified within seven (7) days to resolve any order discrepancies. Returns to stock are only accepted with authorization from the Castelli USA Director of Sales or President. Returns are subject to a 25% restocking fee.

Invoices and Payments

Invoices are emailed and can also be included with the shipment. Upon request, invoices can be mailed (USPS). The undersigned agrees any prompt pay discounts will be taken only within the terms specified on the invoice and the account is current. Any unearned discounts taken will be considered as unpaid balances and remain on the account until paid in full. Discounts cannot be taken when payments are made by credit card. The dealer is responsible for freight charges on the invoice.

NSF Checks

A \$25 NSF check fee will be assessed each time a check is presented and returned. If the check is returned a second time, the account will be placed on hold until the payment is received.

Delinquent Accounts

Castelli USA reserves the right to charge 1.5% interest per month (18% per annum) on past due balances until the account is paid in full as well as all costs of collections, including but not limited to attorney's fees and court costs. Castelli USA reserves the right to hold orders until past due balances have been paid in full.

Conditions of Sale (continued)

Payment Terms offered by Castelli USA

Credit Card: We accept VISA, MC, Discover, AMEX. Card charged on day product ships.

ACH: Provide us with Routing and Account Number. **Form included with this application.** ACH processed day after product ships.

COD: Check is picked up by shipping when product delivered.

Net 30 / CC: At 30 Days, Credit Card is charged.

Net 30 / ACH: At 30 Days, ACH is processed.

Net 30: At 30 days, payment should be received by Credit Card, Check or ACH. (Net 30 will be assigned for all At-Once orders. Preseason Discounted terms will be based on the Sales Program in effect at the time of the order.)

Applicant Signature

Applicant hereby acknowledges that the information provided is true to their knowledge and that applicant has read and accepts the terms and conditions of sale as set forth on this application. MVC USA, LLC dba Castelli USA is hereby authorized to obtain information considered necessary to process this application including bank and credit references. MVC USA, LLC will retain this credit application regardless of approval of credit. The amount of credit granted is to be determined by MVC USA, LLC and may be increased or decreased as MVC USA, LLC deems necessary.

Applicant Signature: _____

Print Name: _____

Title: _____

Date Signed: _____

EFT Authorization for ACH

(*Fill out only if applying for ACH Terms)

Scan & email completed form and a copy of a **VOIDED CHECK** to:
sales@castelli-us.com

Customer Info

Customer Name:

Customer Account Number:

Customer City, State, Zip:

Customer Phone Number:

Financial Info

Financial Institution:

City, State, Zip:

Routing or ABA Number:

Account Number*:

*Copy of voided check must be included.

Authorized Signature

I hereby certify that the information set forth above is correct and authorize UniCredit Bank SpA, on behalf of MVC USA, LLC dba Castelli USA, to initiate debit and credit entries to the Bank account indicated above. This account is used solely for business purposes for payment of all obligations determined by MVC USA, LLC owed by me as a Customer of MVC USA, LLC.

Authorized Signature:

Print Name:

Title:

Date Signed: