

# Retailer Application

1) Business Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Fax: \_\_\_\_\_ Bus.Tel.# \_\_\_\_\_

Owners Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Billing Address: \_\_\_\_\_

\_\_\_\_\_

Shipping Address: \_\_\_\_\_

\_\_\_\_\_

2) Sole Ownership ( ) Partnership ( ) Corporation ( ) LLC ( )

Federal Tax Identification #: \_\_\_\_\_ Date Company Started: \_\_\_\_\_

## 3) TRADE OR CREDIT REFERENCES:

a. Name: \_\_\_\_\_ Tel.# \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Acct.# \_\_\_\_\_

b. Name: \_\_\_\_\_ Tel.# \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Acct.# \_\_\_\_\_

c. Name: \_\_\_\_\_ Tel.# \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Acct.# \_\_\_\_\_

## 4) BANK REFERENCE:

Name \_\_\_\_\_ Tel.# \_\_\_\_\_

Bank Officer: \_\_\_\_\_ Acct.# \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

5) Buyer Contact Information: \_\_\_\_\_ Title: \_\_\_\_\_

**The undersigned states they are authorized to sign on behalf of retailer and states that the contents of this application are true and correct.**

6) Customer Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_