

**DEALER ACCOUNT APPLICATION**

**COMPANY INFORMATION**

Company Name: \_\_\_\_\_ Federal Tax ID: \_\_\_\_\_  
DBA: \_\_\_\_\_ Resale Tax ID: \_\_\_\_\_  
Registered State: \_\_\_\_\_ Date Established: \_\_\_\_\_

Business Type:  Corporation  Partnership  Sole Proprietorship  Other: \_\_\_\_\_

Billing Address: \_\_\_\_\_ State: \_\_\_\_\_  
City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Shipping Address: \_\_\_\_\_ State: \_\_\_\_\_  
City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
URL: \_\_\_\_\_ Fax: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Position: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**ACCOUNTS PAYABLE CONTACT INFORMATION**

Contact Name: \_\_\_\_\_ Position: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**BANK REFERENCE**

Name of Bank: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Bank Account No: \_\_\_\_\_ Phone: \_\_\_\_\_

**TRADE REFERENCE**

Company 1 Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Company 2 Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**AUTHORIZATION**

Applicant Name: \_\_\_\_\_ Position: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_