

DEALER APPLICATION

Please print and fill out application completely. Then mail or fax back to us with the following items:

- Business card
- Business License
- Phone Book Ad/Listing
- Tax Resale Certificate

Company Name: _____

DBA: _____

Address: _____

Phone: _____ Fax: _____

E-Mail: _____

Website: _____

Federal Tax ID#: _____

State Tax Resale Certificate #: _____

(include a copy of certificate with dealer application)

Sole Proprietorship___ Partnership_____

Corporation_____ State of Corp._____

If not a corporation:

Owner: _____

Owner Address: _____

Owner Social Security: _____

Owner Signature: _____