

DEALER / CREDIT APPLICATION

To establish dealer eligibility, all items on the application must be filled out completely, and must include:

**A copy of State Resale Tax Certificate.

**Minnesota Dealers must also provide a ST3 Form.

SECTION 1 – BUSINESS INFORMATION

Company Name:			······································			
			ST: Zip			
Phone:	Fax:	Email:				
Web Page:		Is business listed	in Yellow Pages: □ Yes □ No			
SHIPPING ADDRESS:	Same as billing address above	e □ Ship to address below				
Address:		City:	ST: Zip			
TYPE of Business: Archer	y Only	□ Internet □ Other:				
Business Location: Comm	ercial Building Residenti	al Home Residential Bldg	□ Other:			
Years in business:	Store operating days/hours:					
State Tax I.D. Number:		Date Issued:				
Name & Address on card:						
Credit Card Number:		Type:	Exp Date:			
		Title:	Phone:			
Address:		City:	ST: Zip			
Name:		Title:	Phone:			
Address:		City:	ST: Zip			
Name:		Title:	Phone:			
Address:		City	ST: Zin			

SECTION 3 – BANK INFORMATION

Name of Bank:		Phone:				
Address:		City:		ST:	Zip	
□ Business Account □ Personal Acco	ount Account I	Number:				
Number of years of banking experience	with this institution:	Contact Nam	ne:			
AUTHORIZED CHECK SIGNERS	,	T.' 41	DI.			
Name:						
Address:		-			_	
Signature:			Date:			
Name:	<i>,</i>	Title:	Phone:			
Address:		City: _		ST:	Zip	
Signature:			Date:			
SECTION 4 – CREDIT REFE	RENCES					
Company Name:			_ Contact:			
Address:		City: _		ST:	Zip	
Phone: Fa	x:	Email:				
Years of business relationship:	Current Terms:		Credit Limit:			
Company Name:						
Address:						
Phone: Fa						
Years of business relationship:	Current Terms:			 		
Company Name:			_ Contact:			
Address:		City: _		ST:	Zip	
Phone: Fa						
Years of business relationship:	Current Terms:		Credit Limit:			
-						
PERSONAL GUARANTEE						
***			C	0. ** 4. **		
I hereby agree to pay to the undersign whether individually, partnership or cor						
does hereby individually and personally	=		-		_	
applicant for goods sold to the applica	nt whether said indebte	dness be in the f	form of notes, bill, or or	en accour	nt. If it becomes	
necessary to enforce this guarantee by su	it, I agree to pay interes	t and attorney fee	s as allowed by law.			
G:		D.:4				
Signature:		Print	·			
Signature:		Print	:			
Signature:		Print	:			
· ————————————————————————————————————						

DATE this document was executed by above ownership signature(s):