



# New Dealer Credit Application

for Sioux City Tarp

Company Name: \_\_\_\_\_

Company Website: \_\_\_\_\_

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

City, State, Zip Code: \_\_\_\_\_

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

City, State, Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Form of Business:  Corporation  LLC  Partnership  Sole Proprietor

Is a Purchase Order required?  Yes  No

Name and titles of individual(s) with authorization to submit Purchase Orders? \_\_\_\_\_

If this is a Blanket Purchase Order, please list the number and expiration date.

PO Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Please provide an Attention and Email Address for invoices to be sent to: \_\_\_\_\_

Are you Tax Exempt?  Yes  No

(If so, please attach signed certificate with your Tax Exempt or Reseller Number.)

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# New Dealer Credit Application, Cont.

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If paying by Credit Card, please provide information below:

VISA: \_\_\_\_\_ Exp Date: \_\_\_\_\_ CVC: \_\_\_\_\_

MasterCard: \_\_\_\_\_ Exp Date: \_\_\_\_\_ CVC: \_\_\_\_\_

AMEX: \_\_\_\_\_ Exp Date: \_\_\_\_\_ CVC: \_\_\_\_\_

*We charge a standard 1% fee on all credit card transactions.*

Bank References: (Please list name, address and contact person of banks utilized)

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Trade References: (Please list name, address and phone number)

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We require a \$10,000 Annual Minimum to maintain Dealer Status. We require \$5,000 paid up-front at the time of your first order of the year, that will remain a credit on your account until used up. Accounts will be reviewed at the end of every calendar year to ensure standards are being met. Failure to meet the \$10,000 purchasing threshold will result in losing your Dealer Status pricing.

Our terms are Net 30 days. Accounts not paid in this time frame will be charged 1.5% interest rate per month and future orders will be on a C.O.D. basis until the account is current. Should collection or legal action be required to collect past dues, fees for such action will be added to your account.

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signed Name: \_\_\_\_\_ Date: \_\_\_\_\_