



**PROTECT  
THE FORCE**  
Protection is in our DNA™

# DEALER APPLICATION

## BUSINESS INFORMATION

<b>BUSINESS NAME</b>	<b>BUSINESS PHONE</b>	<b>BUSINESS EMAIL</b>	
<b>BUSINESS ADDRESS</b>	<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>

## BUSINESS TYPE (SELECT ALL THAT APPLY)

<b>GOVT CONTRACTOR</b>	<b>BRICK &amp; MORTAR</b>	<b>TRADE SHOWS</b>	<b>ECOMMERCE / ONLINE</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## BUSINESS HISTORY

<b>YEARS IN BUSINESS</b>	<b>&lt; 1 YEAR</b>	<b>1-2 YEARS</b>	<b>3-5 YEARS</b>	<b>5+ YEARS</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## ONLINE SALES CHANNELS

<b>EBAY</b>	<b>AMAZON</b>	<b>OTHER</b>	<b>LIST OTHER (IF APPLICABLE)</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

## BUSINESS WEBSITE NAME

## WILL YOU BE STOCKING PRODUCTS

	<b>YES</b>	<b>NO</b>
	<input type="checkbox"/>	<input type="checkbox"/>

## TOTAL ANNUAL SALES

## PAYMENT TERMS REQUESTED

	<b>CREDIT CARD</b>	<b>NET 15</b>	<b>NET 30</b>	<b>OTHER</b>
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

## POINTS OF CONTACT INFORMATION

<b>FIRST NAME</b>	<b>LAST NAME</b>	<b>PHONE</b>	<b>EMAIL</b>

\_\_\_\_\_  
Authorized Signature of Owner or Officers

\_\_\_\_\_  
Print Name and Title

\_\_\_\_\_  
Date