



# TRAILER-TUG COMPANY



## Dealer Application

### COMPANY INFORMATION

Name \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_ Fax \_\_\_\_\_  
 \_\_\_\_\_ Website \_\_\_\_\_  
 \_\_\_\_\_ Email \_\_\_\_\_  
 Date Opened \_\_\_\_\_ Business Type  Individual  
 Federal Tax ID \_\_\_\_\_  Partnership  
 CA Resale Number \_\_\_\_\_  Corporation

**(Valid Seller's Permit) Required for all businesses with sales in California.**

*I will resell all trailer dolly equipment and accessories purchased from TRAILER-TUG, LLC in the regular course of my business operations, prior to making any use of them other than demonstration and display. I will be responsible for any dues and penalties under the California Revenue and Taxation Code (Sign bottom of form)*

### OFFICERS/DIRECTORS/OWNERS

1. Name \_\_\_\_\_ Title \_\_\_\_\_  
 Address \_\_\_\_\_ SSN \_\_\_\_\_  
 2. Name \_\_\_\_\_ Title \_\_\_\_\_  
 Address \_\_\_\_\_ SSN \_\_\_\_\_

### TRADE REFERENCES

1. Name \_\_\_\_\_ Account # \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 Terms  Pre-Pay  COD  Net 15  
 Net 30  Net 60  Net 90 Fax \_\_\_\_\_  
 2. Name \_\_\_\_\_ Account # \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 Terms  Pre-Pay  COD  Net 15  
 Net 30  Net 60  Net 90 Fax \_\_\_\_\_  
 3. Name \_\_\_\_\_ Account # \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 Terms  Pre-Pay  COD  Net 15  
 Net 30  Net 60  Net 90 Fax \_\_\_\_\_

### Bank Reference

Bank Name \_\_\_\_\_ Account # \_\_\_\_\_  
 Branch Address \_\_\_\_\_ Phone \_\_\_\_\_

### Store Profile

Type of Store  Skate  Bike  Surf  Ski/Snow  Sporting Goods  Other: \_\_\_\_\_  
 Store Size  <500 sq ft  500 - 1000 sq ft  1000 + sq ft

I have read, understand and agree with the TRAILER-TUG, LLC. Terms & Conditions

REQUIRED SIGNATURE & DATE

*World's Strongest Trailer Dolly*