



HIGHWAVE®

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www.highwave.com

Approval Date (office use only):
Sales Rep (office use only):

APPLICATION FOR WHOLESALE ACCOUNT

Company Name			
Contact Name			
Title			
Phone Number		Fax Number	
E-Mail Address			
Billing Address		City	State
Shipping Address		City	State
Store Website			
Store Description			
Store Type	<b>Brick and Mortar:</b> Yes or No	<b>Online:</b> Yes or No	
<small>(circle all that apply)</small>			
<b>Provide photo of storefront</b>	<b>ATTACH TO EMAIL</b>		
Resale Number #			
<b>Reseller Tax Certification</b>	<b>ATTACH COPY TO EMAIL</b>		
Date Business Commenced			
How many locations do you have?			
How did you hear about us?	Referral (by):	Social Media (explain):	Other (explain):
Social Media	Facebook@	Instagram@	
What are the top brands you currently sell?			

PRODUCT LINES INTERESTED IN

Coffee & Tea		Pet	
Hydration		Home	
Wine & Spirits		Complete Product Line	

TERMS & AGREEMENTS

**Terms of Sale:** Highwave does not authorize the sale of Highwave Products to any 3rd party marketplace such as Amazon, Ebay etc...

By checking the box below, you understand that selling to a 3rd party marketplace will cause for immediate termination of your wholesale contract.

I understand		Initial	
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**MAP Agreement:** Highwave maintains a strict minimum advertised price (MAP) policy. Resellers are free to sell our products for whatever price they choose, but are required to maintain MAP in all advertising, print, web and media exposure. Our MAP is 2 times wholesale cost, unless otherwise noted. Highwave may, at its own discretion, stop supplying products to any retailer found to be in violation of MAP Policy.

I understand		Initial	
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**Business Agreement:**

- All invoices are paid at time of purchase unless other arrangements have been made.
- Claims arising from invoices must be made within three working days of receiving shipment.

I understand		Initial	
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SIGNATURE

Signature	
Name and Title	
Date	