

ALL DEALERS MUST SUBMIT THEIR ORDERS TO ORDERS@UTVSTEREO.COM

Dealer Application

Applicant Information							
Business Name:						Date:	
	Legal Business Name				•		
Billing Address:							
Shipping Address:	Street Address					Unit #	
	City				State	ZIP Code	
	Street Address					Unit #	
	City				State	ZIP Code	
Phone:			Email <u>:</u>				
Date Business Commenced: Federal Tax ID:					State Tax ID:		
Website Address_							
Check all business:	that apply to you	r	Retail Store	::	E-commer	ce: Service:	
Do you se	ell on Amazon						
or Ebay?		Yes:	No:				
Trade Refer (List company nam phone number)							
SIGNAT	URE:						
DATE:_							

PLEASE EMAIL COMPLETED FORM TO ORDERS@UTVSTEREO.COM

UTV Stereo

Direct Debit of Account/ACH

Business		
Business		
City:	State:	Zip Code:
Phone Number:	E	mail:
to initiate deb	it entries for any purc cial institution named ACH transactions to m	orize UTV Stereo/Quality Industries LLC hase from my account indicated above below. I acknowledge that the my account must comply with the
Bank Name:		
Routing Number:	Acc	ount Number:
Type of Account:	Checking	Savings
written notification	from me of its termina	I effect until UTV Stereo has received ation in such time and manner as to a reasonable opportunity to act on it.
Print Name:	Sign	nature:
Date:		
MAIN STREET GREDET UNION 123 Main Street Anytonen, USA		#1120 332-21 1810 20
PAY TO THE ORDER OF		\$\$
Jane Public 321 One Avenue Anytown, USA MEMO_		DOLLARS
	heck # Account #	