RESELLER APPLICATION



COMPANY NAME:					
TAX ID NUMBER:	D&B NU	MBER:			
□Corporation □Limited Liabili	ty L imited P	artnership □Partr	nership 🛮 Other:		
ADDRESS:		SUITE	<u> </u>		
CITY:	STATE:	_ ZIP CODE: _			
≅PHONE:	_		WEBSITE:		
HEADQUARTER LOCATION: _					
OFFICE LOCATIONS:					
PERSONNEL:					
President/owner:		PHONE:	EMAIL:		
Sales manager:		PHONE:	EMAIL:		
PURCHASING:		PHONE:	EMAIL:		
TECHNICAL SUPPORT:		PHONE:	EMAIL:		
ACCOUNTS PAYABLE:		PHONE:	EMAIL:		
ESTIMATED MONTHLY ORDER:					
LAST YEAR DIGITAL SIGNAGE					
MARKET TO TARGET: (CHECK ALL THE APPLY)	BUSINESS TY	PE:	TERRITORY:		
 □ HOME/HOUSEHOLDS □ COMPANY/BUSINESS □ HOTELS/RETAIL/RESTAUTANTS □ GOVERNMENT □ SCHOOLS/EDUCATION □ MEDIA/AD/SIGNAGE □ RENTAL/LEASE □ OTHER 	□ DISTRIBUTOR □ RETAIL/DEALER □ SALES REP □ OTHER		□WEST □EAST □CENTRAL STATES INCLUDE:		
CURRENT PRODUCT LINE:					
NAME:		TITLE:		_	
SIGNATURE:		DATE:		_	