

Distributor Application

Date Submitted: _____



WashGear, LLC

P.O. Box 1466
Grand Junction CO 81502
Voice: 888-8-2SWIPE, Fax: 970-241-8695
Web: www.washgear.com
E-mail: sales@washgear.com

WashGear use only:	
Approved: _____	Date: _____
Open A/C: _____	Cr. Limit: _____
COD/CIA: _____	Sales Rep: _____

Company Name: _____

Mailing Address: _____ City: _____ State: _____ Postal Code: _____

Shipping Address: _____ City: _____ State: _____ Postal Code: _____

Voice Phone: () _____ Toll Free: () _____ Fax: () _____

Main Contact Name: _____ Title: _____

Principle: 1. _____ Title: _____

Principle: 2. _____ Title: _____

Date Business Started: _____ Web Site Address: _____ E-Mail: _____

Type of Business: Corporation Proprietorship Other (Explain): _____ Federal ID #: _____

Manufacturers you are currently representing:

Name	Address	City/State/Code	Phone	Account Number
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

Credit References: (Credit limits of over \$5000.00)

Name	Address	City/State/Code	Phone	Account Number
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____

Bank References:

Name	Address	City/State/Code	Phone	Account Number
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____

IF YOU MAKE SALES INTO THE STATE OF COLORADO, YOU MUST SUPPLY A SALES TAX EXEMPTION CERTIFICATE.

Name of person completing application (Print): _____

Signature of person completing application: _____

THIS APPLICATION CANNOT BE PROCESSED UNTIL THE "SIGNED ORIGINAL" OF THIS FORM IS RETURNED TO WASHGEAR.

