

**Dealer application**

**Please note this is not a credit application**

Name of company \_\_\_\_\_

Billing address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone ( ) - Fax ( ) -

E-mail \_\_\_\_\_

Tax ID \_\_\_\_\_ Do you P.O.#? \_\_\_\_\_

**Shipping address if different than billing address:**

**Shipping address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Payment:** All order must be paid in full before shipping. We use PayPal for payments.

Fax application and copy of Tax ID to 386-310-1054 or e-mail to sales@superdutyskidplate.com