



(814) 695-5778

VISA

MasterCard

Discover

PayPal

[ Free shipping on all orders over \$150 ]

309 Route 22

Hollidaysburg PA 16648

Phone/Fax: 814-695-5778

website: [www.AD-DiscountPerformance.com](http://www.AD-DiscountPerformance.com)

### DEALER APPLICATION

Company Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

State Resale # \_\_\_\_\_ Federal ID#: \_\_\_\_\_

Business Structure: Single owner: \_\_\_\_ Partnership: \_\_\_\_ INC: \_\_\_\_

Principals: Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Years in Business: \_\_\_\_\_

### Bank Info:

Name of Bank: \_\_\_\_\_

Branch Address: \_\_\_\_\_

Acct #: \_\_\_\_\_ Acct officers Name: \_\_\_\_\_

Bank Phone # \_\_\_\_\_

Please sign to authorize access to bank information: \_\_\_\_\_

### Trade References:

1. Name: \_\_\_\_\_ Acct # \_\_\_\_\_ Phone # \_\_\_\_\_

2. Name: \_\_\_\_\_ Acct # \_\_\_\_\_ Phone # \_\_\_\_\_

3. Name: \_\_\_\_\_ Acct # \_\_\_\_\_ Phone # \_\_\_\_\_

Expected to purchase annually: \$0-\$1000 \_\_\_\_ \$1001-\$3000 \_\_\_\_ \$3001-\$10K \_\_\_\_ \$10K+ \_\_\_\_

**Credit Card Information:**

**(Visa / MasterCard / Discover / American Express Accepted)**

**Credit Card #** \_\_\_\_\_ **EXP Date:** \_\_\_\_\_

**CVV Code:** \_\_\_\_\_

I authorize A&D Discount Performance to keep this card on file and charge it for orders.

**Signature:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

**Please Provide the Following:**

1. A completed Dealer application.
2. A picture of your company's storefront/showroom and website.

**I authorize all the information that is in this application is accurate.**

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print name Officer/Owner:** \_\_\_\_\_

**E-mail address:** \_\_\_\_\_

**Contact Phone #:** \_\_\_\_\_