



United States Wholesale Account Application

Applicants Name: _____

Physical Address: _____

City: _____ State: _____ Zip Code: _____

Country: _____ Date of Birth: _____

Phone Number: _____ Fax Number: _____

Email: _____ Website: _____

Is This a Residential Address? Yes No

Number of years at this address: _____

Own or Rent: _____

Type of Business: (Please circle)

Manufacturer

Retailer

Rod Builder

Tackle Store

Other _____

Corporation

Partnership

Sole Proprietor

Federal Employer ID Number: _____

Business Start Date: ____/____/____

State Sales Tax ID #: _____

State Incorporated: _____

Date Incorporated: ____/____/____

(Please provide a copy of Certificate or Sales Tax ID Form)

	NAME OF PRINCIPAL	TITLE	HOME ADDRESS	PHONE NUMBER
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

Trade References:

1. Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____

2. Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____

3. Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____

TERMS AND CONDITIONS:

This application is submitted in writing for the purpose of obtaining merchandise from **GET BIT OUTDOORS, INC.** at wholesale prices. I, the customer authorize Get Bit Outdoors, Inc. to obtain trade information as deemed necessary.

The undersigned has read and understands the wholesale application and agrees to the terms and conditions and certifies that the information provided in this application is true and correct.

Corporate Name (If Applicable): _____

Signature (Owner / Partner): _____

Date: ____/____/____

Print Name: _____

Title: _____

Signature (Owner / Partner): _____

Date: ____/____/____

Print Name: _____

Title: _____