



# DEALER APPLICATION

Phone 425-771-2182

Fax 425-771-2650

COMPANY NAME \_\_\_\_\_ DATE \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

SHIPPING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PREVIOUS ADDRESS (if at present address less than 5 years) \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

NAME AND ADDRESS OF PARENT CO. (If subsidiary) \_\_\_\_\_

TELEPHONE NO. \_\_\_\_\_ FAX NO. \_\_\_\_\_ TAX I.D. # OR SSN # \_\_\_\_\_

TYPE OF BUSINESS and TRADE: \_\_\_\_\_

### BUSINESS STRUCTURE:

CORPORATION \_\_\_\_\_ PARTNERSHIP \_\_\_\_\_ INDIVIDUAL \_\_\_\_\_

STATE OF INCORPORATION \_\_\_\_\_ YEAR INCORPORATED \_\_\_\_\_

### PRINCIPALS

NAME \_\_\_\_\_ TITLE \_\_\_\_\_ ADDRESS \_\_\_\_\_

NAME \_\_\_\_\_ TITLE \_\_\_\_\_ ADDRESS \_\_\_\_\_

NAME \_\_\_\_\_ TITLE \_\_\_\_\_ ADDRESS \_\_\_\_\_

ACCOUNTS PAYABLE MANAGER \_\_\_\_\_ TELEPHONE NO. \_\_\_\_\_

BANK REFERENCE \_\_\_\_\_ BRANCH \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CHECKING ACCOUNT NO. \_\_\_\_\_ SAVINGS ACCOUNT NO. \_\_\_\_\_

### COMMERCIAL LOANS

SECURED \_\_\_\_\_ ACCOUNT NO. \_\_\_\_\_

SECURED \_\_\_\_\_ ACCOUNT NO. \_\_\_\_\_

UNSECURED \_\_\_\_\_ ACCOUNT NO. \_\_\_\_\_

UNSECURED \_\_\_\_\_ ACCOUNT NO. \_\_\_\_\_

ACCOUNT MANAGER \_\_\_\_\_ TELEPHONE NO. \_\_\_\_\_

LIST BELOW THE NAME OF THE PRINCIPAL COMPANIES WITH WHOM YOU PURCHASE ON A DIRECT BASIS:

COMPANY NAME \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ FAX \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

COMPANY NAME \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ FAX \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

COMPANY NAME \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ FAX \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

COMPANY NAME \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ FAX \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

COMPANY NAME \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ FAX \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

FAX \_\_\_\_\_

PLEASE CHECK ALL TYPES of BUSINESS ACTIVITIES LISTED BELOW THAT YOUR COMPANY IS ENGAGED IN:

REPAIR, SERVICE AND INSTALLATION:

WHOLESALE to DEALERS:

RETAIL TO THE PUBLIC:

MAUFACTURERS WARRANTY CENTER:

MANUFACTURING:

PLEASE BRIEFLY DESCRIBE THE TYPES OF PRODUCTS YOUR COMPANY SELLS OR PRODUCES:

PLEASE BRIEFLY DESCRIBE THE GEOGRAPHIC AREAS THAT YOUR BUSINESS SERVICES OR PROVIDES SALES:

AMOUNT OF CREDIT REQUESTED \$ \_\_\_\_\_ (If in excess of \$2000.00 a copy of your latest financial and operating statements are required).

The forenamed company hereby makes application for Dealership or credit and provides the information contained herein, which is warranted to be true and correct for the purpose of inducing SEA, Inc to make periodic sales of goods and of equipment to it said company. In consideration thereof, it is agreed and understood that (1) the undersigned is an authorized agent of the applicant and is duly empowered to enter into and make binding agreements on its behalf, (2) all account balances are to be paid in full within stated terms from the date of invoice, (3) all payments shall be made to SEA, Inc at its office at 7030 220th S. W., Mountlake Terrace, WA 98043, (4) in the event of default of payment when due, all of the costs of collections, including attorney's fees and court cost shall be paid by the applicant.

THE APPLICANT HEREBY ACKNOWLEDGES THAT THE INFORMATION PROVIDE HEREIN IS CURRENT AND CORRECT. AND FURTHER ACKNOWLEDGES THAT SEA, INC., AT ITS SOLE DISCRETION AND WITHOUT NOTICE, MAY DECLINE TO OFFER OPEN ACCOUNT STATUS AT ANYTIME AND FOR ANY REASON.

APPLICANT

BY: \_\_\_\_\_

TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_