



New Wholesale Account Application

Company billing information

Company Name:	Date:	
<input type="text"/>	<input type="text"/>	
E-mail Address:	Address Line 1:	<input type="text"/>
<input type="text"/>	Address Line 2:	<input type="text"/>
Telephone Number:	City:	<input type="text"/>
<input type="text"/>	State/Province:	Postal Code:
Fax Number:	<input type="text"/>	<input type="text"/>
<input type="text"/>	Resale Tax Certificate Number:	<input type="text"/>
Web Site Address:	<input type="text"/>	
<input type="text"/>		

Company shipping information

shipping address is the same as billing

Deliver To

Company Name:	Address Line 1:	
<input type="text"/>	<input type="text"/>	
E-mail Address:	Address Line 2:	
<input type="text"/>	<input type="text"/>	
Telephone Number:	State/Province:	Postal Code:
<input type="text"/>	<input type="text"/>	<input type="text"/>

Information

Please tell us a little about your store and the other lines you carry in the space below.

To receive our wholesale information and pricing, please fill out this form and fax it back to us at (707) 963-5012. After we receive this information, we will send you our wholesale information. Thank you for your interest in our products and we look forward to working with you. If you have any questions, please call us at (707) 963-5010.