



## Aaron Carlson Ballistics Dealer/Distributor Application Form

### Applicant Business Information

Name: \_\_\_\_\_ DBA (if any): \_\_\_\_\_

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

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Type of Business: \_\_\_\_\_ Date Business Starts: \_\_\_\_\_

Federal Tax ID: \_\_\_\_\_ Resale License Number: \_\_\_\_\_

Projected Annual Sales of Aaron Carlson Ballistics Products (in US Dollar):

\$ \_\_\_\_\_

Estimated Initial Order Amount from Aaron Carlson Ballistics (in US Dollar):

\$ \_\_\_\_\_

Ownership:  Sole Owner/Individual  Partnership  Corporation  LLC

Mgmt. Co.  Other \_\_\_\_\_

Shipping Address (if different): \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Do you plan to drop-ship to your customer's addresses?  Yes

List other millwork and ballistic vendors you currently do business with:

\_\_\_\_\_

Do you have a showroom/retail storefront?  Yes

If yes, what percentage of retail floor space would be allocated for Aaron Carlson Ballistics products?

0-25%  25-50%  50-75%  75% or more

Do you currently or plan to do online business through Internet?  Yes

If yes, what percentage of your total sales would result from Internet sales?

0-25%  25-50%  50-75%  75% or more

Who may order for this account: \_\_\_\_\_

\_\_\_\_\_

Purchase order required?  Yes  No

Check here if you would like to be exempt from being disclosed on our Distributor Database.

I hereby state that the information contained herein is correct and not misleading, and I agree to the terms described in the Dealer Agreement associated with this Application. I understand the above information is given in confidence for the sole purpose of requesting an account with Aaron Carlson Ballistics.

Applicant: \_\_\_\_\_ Signature: \_\_\_\_\_