



Reseller Application

Contact Information

Date: _____
 Your Full Name: _____
 Billing Address: _____

 Shipping Address (if different): _____
 Phone Number: _____
 Alternate Phone Number: _____
 Fax Number: _____
 Email Address: _____

Company Information

Name of Company (DBA): _____
 Website URL: _____
 Principle's Name: _____
 Account Payable Contact: _____
 Reseller Tax #: _____ (Please fax reseller license with this document)
 Federal Tax# or S.S.#: _____
 Years in Business: _____
 Legal Entity: _____
 Company Description: _____

Have you, or any principal of this company been sued or filed bankruptcy?
 Check One: () No () Yes if yes, please explain:

Guaranty Agreement:

The signature of the applicant attests financial responsibility and ability to pay invoices in accordance with the following terms.

Payment Terms: () Credit Card () Prepay with Business Check/Money Order () Net 15/30

In consideration of this account and sale of merchandise, I agree for myself and/or my company to pay all invoices within 15 days of invoice date. I understand that Rockwell Industry reserves the right to assess a late payment charge of 12% on all past due invoices and all merchandise will remain the property of Rockwell industry until paid in full. I acknowledge the above information is for the purpose of obtaining credit and is warranted to be true. I hereby authorize Rockwell Industry may investigate the references listed pertaining to credit and financial responsibility, directly or through TRW/D&B Credit Reporting Services. I understand that any collection cost involving this account will be subject to the highest penalty by the state of California.

All fields required:

Company Name: _____
 By: _____
 Title: _____
 Date: _____
 Signature: _____

To meet our approval guidelines as a reseller, you need to be in business for at least 12 months in a similar industry, have a professional website (or storefront) and 3 trade references.

Trade References

1

Company Name: _____
Account Number: _____
Business Address: _____
Phone Number: _____

2

Company Name: _____
Account Number: _____
Business Address: _____
Phone Number: _____

3

Company Name: _____
Account Number: _____
Business Address: _____
Phone Number: _____