



2750 Indian Ripple Road
Dayton, Ohio 45440
Local 937-458-0210
Fax 937-458-0319
info@rubbnrepair.com

Internal Use:
Sales Rep: _____
Date Received: _____
Manager Approval: _____
Price Level: _____

Dealer / Distributor Application

In order to properly qualify your account for dealer status and pricing, please complete this application. This information is necessary to 1) help protect our dealer accounts and ensure that private parties do not purchase at dealer prices and 2) help process your orders quickly and accurately.

Company Name: _____

Address: _____

City: _____ State: _____ Postal Code: _____

Phone Number: _____ Fax _____

Email Address: _____ Authorized Buyer: _____

Years in Business: _____ State Sales Tax Number _____

Owner's Name: _____

You may mail, fax, or email this application. We would appreciate your cooperation in establishing your account by including any of the following documentation:

Copy of Business License	Copy of State Sales Tax Certificate
Pictures of your shop	Copy of yellow pages ad or local phone book listing
Web link	Digital logo

Authorized Signature: _____ Date: _____