



189 Cobb Parkway N. Suite A-7. Marietta, GA 30062. 770-977-5774. FAX: 770-977-4596. www.source1dist.com

New Dealer Application

Business Information			
Company:			
Address:			
City, State, Zip:			
Store Phone #		Cell Phone #	
Years in Business		Fax #	
Resale Tax #		Bus. License #	
Website		Email Address	
Personal Contact Information			
Name:			
Home Address:			
City, State, Zip:			
Title		Social Security #	
Banking Information			
Bank Name:			
Address:			
City, State, Zip:			
Phone #		Account #	

Faxed signatures will be accepted and relied upon by Source One Distributors as original signatures for all purposes related to this application



Credit References			
Name:			
Address:			
City, State, Zip:			
Phone #		Contact	
Account #		Account Type	
Name:			
Address:			
City, State, Zip:			
Phone #		Contact	
Account #		Account Type	

This dealer application is an application to establish an account under which Source One Distributors may advance inventory or credit to the business entities or persons listed herein. Entities receiving inventory or credit promise, and all persons signing this application in any capacity whether personally, as a guarantor, or on behalf of any entity, guaranty, jointly and severally, to pay Source One Distributors for all inventory or products or the terms in this application. Each party signing this agreement covenants to give written notification to Source One Distributors 90 days prior to closure or any change of ownership of any entity or business referenced herein and the intended date to cease operation.

All invoices accompanying any product advanced by Source One Distributors are due and payable according to the terms listed on any invoice accompanying product. Returned checks will forfeit all discounts. There is a \$25.00 service charge on any returned check. All past due balances related to invoices for products advanced pursuant to this dealer application will be assessed a 10% late fee plus accrued interest at the rate of 15% per month.

Signature: _____ Title: _____

Printed Name: _____ Date: _____