



## DEALER INFORMATION SHEET

### BUSINESS INFORMATION – Must be completed

Legal Name:

DBA Name (if different from Legal Name):

Billing Address:		City:	State:	Zip:
Phone:	Fax:	Promotional E-mail:		
Shipping Address:		City:	State:	Zip:
		Year Business Started:		
Purchasing Contact:		Phone:	Contact Email:	
Accounts Payable Contact:				
Phone:	Fax (for invoices):		Accounts Payable Email:	
Business Website: www.		# of Employees:	# of Locations:	
Type of Business:			Home Based Business: Y N	
Sole Proprietorship:	Corporation:	Partnership:	LLC:	Other: (indicate type)

### PREFERRED METHOD OF PAYMENT – Pick all that apply

**Credit Card:** (Please Note: We will not charge your customers credit card.)

**Wire Transfer/Electronic Payment:** Please ask your Wilson sales rep for details.

**--Attach a copy of your sales tax resale license if not shipping to a forwarder--**

### BUSINESS OWNERS, PARTNERS, & OFFICERS (Attach additional pages if necessary)

List all Owners, Partners or Officers of Business:

Name:	Title:	E-mail:
Name:	Title:	E-mail: