

# Wholesale Account Request Form

Saltgrass Ranch LLC

Request Wholesale Consideration

## Business Information

Business Name

DBA / Trade Name (if applicable)

Business Type (e.g., Restaurant, Grocery, Specialty Retail)

Business Address

## Primary Contact

Contact Name

Title / Role

Email Address

Phone Number

## Program Interest

Primary Products of Interest (e.g., Dry-Aged Beef, Dry-Aged Pork, Premium Cuts)

Estimated Monthly Volume

Preferred Fulfillment Method (Pickup / Delivery / Shipment)

Preferred Start Timeline

## Food Safety & Operations

Saltgrass Ranch LLC | Wholesale programs subject to availability and approval. All products are perishable.  
Temperature-Controlled Storage Available? (Yes / No)

Food Safety Certifications (if applicable)