

Preferred Shutters Wholesale Dealer Application

| Business Information | | | | Applicant Information | | | |
|---|--|------------|--|----------------------------------|--|-------------|--|
| Business Name: | | | | Applicant Name: | | | |
| DBA: | | | | Title In Business: | | | |
| Business Address: | | | | Address | | | |
| City: | | County: | | City: | | County: | |
| State: | | Zip Code: | | State: | | Zip Code: | |
| Phone: | | | | Phone: | | | |
| Cellphone: | | | | Cellphone: | | | |
| Email Address: | | | | Email Address: | | | |
| Business Type: | | | | Drivers License: | | | |
| | | | | | | | |
| Years In Business: | | | | Approximate Annual Sales Volume: | | | |
| Primary Business Type: | | | | Business Location: Store Front: | | Home Front: | |
| Business EIN: | | | | Tax ID #: | | | |
| Please Let Us Know What Window Products you are interested in Purchasing We Offer a Full Line of: | | | | | | | |
| Interior : Premium Basswood Shutters Zebra Shades Roller Shades Cellular Shades Fauxwood Blinds Vertical Blinds | | | | | | | |
| Exterior : Solar Screens Roller Shades | | | | | | | |
| Interested Window Products- | | | | | | | |
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| Please Submit Certificate Of Resale If Available, Send a copy with your Dealer Application. | | | | | | | |
| If Certificate Of Resale is not Provided Taxes will be applied for all Products Purchased through Preferred Shutters LLC! | | | | | | | |
| | | | | | | | |
| Print Name: | | Signature: | | Title: | | Date: | |
| PLEASE PRINT THE APPLICATION FILL IT OUT AND EMAIL IT TO PREFERREDSHUTTERS702@GMAIL.COM | | | | | | | |
| Preferred Shutters LLC Office: (702)-768-0248 Call or Text Email: Preferredshutters702@gmail.com Preferredshutters.com | | | | | | | |