

EMAIL TO: National Sales manager: bobp@madeli.com

## **DEALER APPLICATION**

DEALER APPLICATION: Please fill out all sections and sign. CONFIDENTIAL INFORMATION FOR CREDIT VERIFICATION

COMPANY NAME:							DATE:
PHONE:		FAX:			EMAIL:		
STREET ADDRESS:				CITY:		STATE:	ZIP:
SHIPPING ADDRESS	8:			CITY:		STATE:	ZIP:
PARTNERSHIP [	SINGLE OW	NERSHIP	CORPORATION L	LC OTHER	R		
PRESIDENT/OWNER	!:						
VICE-PRESIDENT/O\	WNER:						
CONTROLLER:							
IN BUSINESS SINCE	:	TYPE	OF BUSINESS:			NO OF EN	MPLOYEES:
EXPECTED MONTHL	Y PURCHASE:		CREDIT LINE [	DESIRED:	DO \	OU USE PO:	
PURCHASING AGEN	IT:		R	RESALE NO:		FED.TAX ID#: _	
account.		ving credit refe	rences to disclose all de	etails necessary	to allow Madeli US	A LLC to consider	the establishment of an ope
BANK REFERENCES CHECKING:	NAME:						FAX:
LOAN:	NAME:		BRANCH: _		PHONE: _		FAX:
ASSETS PLEDGED:	YES	NO	WITH WHOM?				
TRADE CREDIT REF	ERENCES						
1 - NAME:				EMAIL:			
PHONE:		FAX:					
STREET ADDRESS:				CITY:		STATE:	ZIP:
2 - NAME:				EMAIL:			
PHONE:		FAX:					
STREET ADDRESS:				CITY:		_ STATE:	ZIP:
3 - NAME:				EMAIL:			
PHONE:		FAX:					
STREET ADDRESS:				CITY		STATE:	7ID·

## **AGREEMENT**

The undersigned agrees that Madeli USA LLC is entitled to and shall be reimbursed any expenses incurred in protecting or enforcing its rights under this account, including but not limited to reasonable attorney fees and collection expenses. Madeli USA LLC shall be entitled to interest at the maximum legal interest rate allowable in all past due amounts.

Authorized Signature:	Print:	Title:	Date:
	consideration. The Undersigned hereby personally guarante ectly against this guarantee without first exhausting all collect		•
Signature:	Print:	Title:	Date:
	ne undersigned agrees <u>not to sell</u> any Madeli products or to r -party websites such as eBay, Walmart, or Amazon. Violation	•	•
Authorized Signature:	Print:	Title:	Date:
М	adeli, USA LLC   9710 NW 110th Ave., Suite 1   Tel: 305-718-8817   Fax: 305-718-8477		

8/29/2024