

# Eagle Tree Systems Dealer Application/Credit Request Form

Please complete the following form and fax it back to us, including advertising flyers and/or storefront photos if applicable. Our fax # is (425)484-4131. Note that, to protect you and us, we will check credit and banking references to verify that your company is an active, legitimate hobby dealership. Once we process your application, you will receive our dealer pricing information and terms.

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

City: \_\_\_\_\_

State/Province: \_\_\_\_\_ ZIP/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Years in business: \_\_\_\_\_

Business type (circle all that apply): Internet    Storefront    Mail-order

Website URL: \_\_\_\_\_ email address: \_\_\_\_\_

Business Principal: \_\_\_\_\_ Title: \_\_\_\_\_

## ***Credit References***

1. Company Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

2. Company Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Do you wish to apply for an open account (terms 2% 10 net 30): yes    no

If yes to above, provide banking information for your business:

Bank: \_\_\_\_\_ Telephone: \_\_\_\_\_ Account #: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

I certify that the above information is accurate and hereby give Eagle Tree Systems, LLC authorization to inquire about the accounts I provided above.

Signed: \_\_\_\_\_  
(print full name of company)

Signed By: \_\_\_\_\_  
(signature and title of business principal)

Date: \_\_\_\_\_