

Dealer Application for US Retailers



Company Information

Name:	_____	Chairman:	_____
Address:	_____	Title:	_____
	_____	Capital fund	_____
	_____	Established in:	_____
Tel:	_____	Annual sales:	_____
Fax:	_____	# of stores:	_____
URL:	_____	# of employees:	_____
EIN #:	_____	Tax ID#:	_____

Main Contact Information

Name:	_____	email:	_____
Title:	_____	Address (if different from above):	_____
Tel:	_____		_____
Fax:	_____		_____

Invoice Information

Invoice to (if different from above):	_____	Tel:	_____
	_____	E-mail:	_____
Contact:	_____	Payment Preference:	___ Credit Card ___ Net 30

Shipping Information

Shipment to (if different from above):	_____	Tel:	_____
	_____	Fax:	_____
	_____	Shipping:	UPS / FedEx / Others[_____]
Contact:	_____	Account #	N/A

Bank Information

Bank:	_____	Tel:	_____
Address:	_____	Fax:	_____
	_____	Account #	_____
	_____		_____

Trade Credit References

_____	_____
_____	_____
_____	_____
_____	_____

Contact: Tomo Sekiguchi
Phone: 503-314-5119
30555 Butte Creek Rd.
Lebanon, OR 97355
info@sotooutdoors.com
www.sotooutdoors.com

Signature _____

How did you learn about SOTO? _____

Amazon Retailer? What is your FBA rank? _____

Date: _____