



Pride Distributing, Inc.

15955 West Hardy Road, Suite 312
Houston, TX 77060 - 3151
O) 855.999.TINT (8468) F) 281.445.8468
Accounting@PrideDistributing.com

DEALER APPLICATION & SALES AGREEMENT

Please select option below:

COD - Company Check (Requires Approval)

CREDIT CARD _____ Visa _____ MC _____ AMEX _____ Discover

DEBIT CARD _____ Visa _____ MC _____ AMEX _____ Discover

Debit / Credit Card # _____

Expiration Date _____ CVV _____

Name on Card _____

Statement Address _____

City _____ State _____ Zip _____

Phone # _____

Signature of Cardholder _____ Date _____

X _____

BOX COMPLETED BY PRIDE DISTRIBUTING, INC.

Account # _____	Date _____
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The following statement in writing is made by the applicant for the purpose of purchasing merchandise from Pride Distributing, Inc. and Pride Distributing, Inc. shall rely on all information as correct. Applicant authorizes Pride Distributing, Inc. to contact any references given and inquire of them about credit and/or payment history. Upon the approval of this application, applicant agrees to abide by the terms and conditions of sale. Applicant further agrees to notify Pride Distributing, Inc. within five days of any changes of ownership, address, telephone numbers, authorized purchasing agent(s), banks, transfer of listed assets, or other facts set forth below.

BUSINESS INFORMATION

Legal Name of Firm _____ Phone _____

Billing Address _____

Name of Parent Company (if subsidiary) _____

Principal Business Address _____ Phone _____

City _____ State _____ Zip _____ Fax _____

Type of Business _____ Email _____

At Present Location Since (date) _____ Years in Business _____

President / Owner _____ Purchaser _____

Tax Resale # _____ State _____

BANK REFERENCES - ONLY COMPLETE IF REQUESTING COMPANY CHECK - Account MUST BE in the business name.

Bank _____ Account # _____

Address _____ Phone # _____

City _____ State _____ Zip _____ Contact _____

Account Holder SS/EIN _____ Date of Birth _____

Driver's License # _____ State Issued _____

I, (Print Name) _____ authorize my bank to release any necessary information to Pride Distributing, Inc for their confidential use in processing my application for check approval and I do hereby personally guarantee any and all checks written to Pride Distributing, Inc. as payment for goods shipped, should any checks be dishonored for any reason whatsoever by my bank. In the event of a lawsuit for collection, I agree to pay reasonable attorney fees, court costs, and collection agency fees incurred by Pride Distributing, Inc.

Signature _____ Title _____ Date _____