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 2734 High Desert DR.
 Prineville, OR 97754

CONFIDENTIAL
DEALER APPLICATION

A. THIS DEALER APPLICATION IS BEING SUBMITTED BY:

Legal Name _____
 Other Names Used _____
 Address _____
 City _____ State _____ Zip _____
 Phone _____ Fax _____

Corporation Partnership Proprietorship

Date Business Established _____

B. NAMES OF PRINCIPAL OFFICERS, PARTNERS OR OWNERS:

Name _____ Title _____
 Address _____ Stock Owned ____%
 Name _____ Title _____
 Address _____ Stock Owned ____%

PERSON TO CONTACT REGARDING FINANCIAL MATTERS:

Name _____ Title _____

C. HAVE WE EVER SOLD TO YOU BEFORE OR TO ANY PRESENT OR FORMER
 AFFILIATE? Yes No

If Yes, under what name and when? _____

E. RETAIL SALES TAX NUMBER _____

F. FEDERAL TAX ID _____

G. TERMS AND CONDITIONS

Products will not be shipped until payment has been received; in the case of a check product will wait until check has funded at the bank. Applicant shall pay such costs, expenses and reasonable attorneys fees that may occur in any manner of collection of any sums past due as Open Account credit extended.

The undersigned certifies that the contents hereof and the financial data which is submitted herewith accurately represent the financial condition, without material change, of the applicant to the date.

Dated _____

Signature of individual of name of corporation, partnership, or other

By _____

(If corporation, please have Officer execute)