



9770 Silicon Prairie Parkway • Madison, WI 53593-8442
 Toll Free: 800-828-0509 • Local: 608-831-1946 • Fax: 608-831-1890
 www.vu-gear.com

DEALER APPLICATION

TYPE OF ACCOUNT: NEW UPDATE INFO REINSTATE
 CUSTOMER NUMBER (IF KNOWN): _____

PLEASE NOTE:
 AN OPENING ORDER MUST ACCOMPANY
 A DEALER APPLICATION.

SOLD TO: (BILLING ADDRESS)

LEGAL NAME: _____ DBA: _____
 ADDRESS: _____
 CITY: _____ STATE: _____ ZIP: _____
 AUTHORIZED CONTACT PERSON: _____ TITLE: _____
 EMAIL ADDRESS: _____ PHONE: _____
 WEBSITE: _____ FAX: _____
 YEARS AT LOCATION: _____ DATE COMPANY ESTABLISHED: _____
 FED ID #: _____

SHIP TO: SAME AS ABOVE DIFFERENT (PLEASE FILL-IN INFORMATION)

CUSTOMER NAME: _____
 ADDRESS: _____
 CITY: _____ STATE: _____ ZIP: _____
 PHONE: _____ FAX: _____

ORDER PLACEMENT AUTHORIZATION:

NAME: _____ TITLE: _____ EMAIL: _____
 NAME: _____ TITLE: _____ EMAIL: _____
 NAME: _____ TITLE: _____ EMAIL: _____

BUSINESS TYPE:

RETAIL CONTRACTOR/INTEGRATOR DISTRIBUTOR RENTAL

Please select the market that is your PRIMARY source of revenue. Please select only ONE.

<u>RETAIL</u>	<u>CONTRACTOR/INTEGRATOR</u>	<u>DISTRIBUTOR</u>	<u>RENTAL</u>
MUSIC INDUSTRY	SCHOOLS & UNIVERSITIES	MUSIC DEALERS	TOURING
PRO AUDIO	HEALTH	INSTALLATION	HOSPITALITY
RECORDING	HOSPITALITY	SECURITY	CORPORATE
BROADCAST	COMMERCIAL		
DJ	GOVERNMENT		
LIGHTING	HOUSES OF WORSHIP		
CONSUMER	CONSULTANT		



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TRADE REFERENCES: Please list 3 manufacturers or distributors for whom you are a dealer.

1. COMPANY NAME: _____
 ADDRESS: _____
 CITY: _____ STATE: _____ ZIP: _____
 CONTACT NAME: _____ PHONE: _____ FAX: _____

2. COMPANY NAME: _____
 ADDRESS: _____
 CITY: _____ STATE: _____ ZIP: _____
 CONTACT NAME: _____ PHONE: _____ FAX: _____

3. COMPANY NAME: _____
 ADDRESS: _____
 CITY: _____ STATE: _____ ZIP: _____
 CONTACT NAME: _____ PHONE: _____ FAX: _____

TAX EXEMPTION INFORMATION:

Please attach, fax or email a copy of all appropriate state’s sales tax exemption certificates or multi-jurisdictional certificates.

FDW Corp will not ship to any address without a valid tax exemption certificate. Fax: 608-831-1890 Email: customerservice_fdw@fdwcorp.com

TERMS & CONDITIONS:

1. Payment terms for orders are credit card or CWO (cash with order).
2. The Applicant warrants that the statements in this application are true and complete and are made for the purpose of establishing a business relationship with FDW Corp, which may include the granting of credit at FDW Corp’s sole discretion. FDW Corp is hereby authorized to obtain any information necessary from any source concerning this dealer application. Applicant promises to pay for all purchases within the terms and conditions for sale presented upon the invoice, regardless of whether terms are cash, check, credit card, COD, or open “net” account terms. Applicant agrees that in the event of late payment, Applicant will pay all finance charges that may be assessed on past due invoices at the rate of 1.5% per month (18% per annum). Applicant further agrees that in the event that a past due amount is referred for collection, the undersigned will pay any and all costs of collection, including reasonable attorney fees. The undersigned warrants that s/he is an owner or officer and is thereby authorized to enter into this agreement on behalf of the Applicant organization.
3. Applicant shall pay all amounts owing on or before the net due date as shown on each invoice. FDW Corp shall be entitled to a service charge from Applicant on all checks returned due to non-sufficient funds (NSF).
4. Applicant understands and agrees to abide by the policies set forth by individual manufacturers whose products are purchased by Applicant. Policies include but are not limited to Minimum Advertised Price (MAP), catalog and/or Internet presence and sales and trans-shipping.
5. Applicant has verified and attests that all information contained in this application is true, correct and complete.
6. Applicant has read FDW Corp’s Terms & Conditions and by signing this application agrees to abide by such as stated.

AUTHORIZED OFFICER OR AGENT:

SIGNATUREEMAIL ADDRESSDATE

By checking box, applicant certifies electronic signature is the legally binding equivalent of a traditional handwritten signature.