



Thanks for your interest in carrying Tronex Tools in your store! Please complete the form below and email it to curt@fargo-ent.com along with a copy of your resale tax certificate, to register as a wholesale vendor. After reviewing this information, we will contact you normally within 48 hours.

RETAILER APPLICATION FORM

BUSINESS INFORMATION			
Company Name:		Date Business Commenced	___/___/___
DBA or AKA:		<input type="checkbox"/> Sole proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other <input type="checkbox"/> Residential Address	Notes:
Registered company address City, State & ZIP			
CONTACT INFORMATION			
Primary Contact:			
Position:		Phone No.:	
E-mail:			
SHIPPING INFORMATION			
Ship to		Phone No.:	
Address		E-Mail:	
City, State ZIP Code			
PAYMENT INFORMATION			
Primary Card:	<input type="radio"/> Visa <input type="radio"/> Master Card <input type="radio"/> American Express <input type="radio"/> Discover <input type="radio"/> Open Acct		
Credit Card#:			
Expiration Date:		CVV#	
Name as appears on card			
Billing Address if different			
TRADE INFORMATION			
<i>Describe your relationship to the Jewelry Trade, your business and the method of distribution:</i>			
Trade Reference 1:			
Trade Reference 2:			
ON-LINE PRESENCE			
Web Store URL:		eBay Seller Name:	
Amazon Seller Name:		Walmart Seller Name:	
Other Platforms:			
SIGNATURE			
Signature:		Date:	
Name:		Title:	