

# DHE Dealer Application Form

Date \_\_\_\_\_

Complete Official Business Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Shipping Address (if different than above) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Telephone: \_\_\_\_\_

Business Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Check One:

\_\_\_\_\_ Proprietorship

\_\_\_\_\_ Corporation

\_\_\_\_\_ Partnership

\_\_\_\_\_ LLC

If Corporation, list Officers:

President \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_

Vice President \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_

Secretary/Treasurer \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_

County Located In \_\_\_\_\_

If Corporation, which state Inc. \_\_\_\_\_

Federal Tax ID# \_\_\_\_\_

Year Corporation Started \_\_\_\_\_

Year Incorporated \_\_\_\_\_

Annual Sales Volume \$ \_\_\_\_\_

Sales Tax Number \_\_\_\_\_

A current copy of your tax exemption certificate must accompany this application.

If Partnership List Owners Name:

President \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_

Social Security # \_\_\_\_\_

Vice President \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_

Social Security # \_\_\_\_\_

Secretary/Treasurer \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Social Security # \_\_\_\_\_

Fax Number: 256-356-8300

Mailing Address: PO Box 140

Red Bay, AL 35582

# DHE Dealer Application Form

Bank Reference and Address: \_\_\_\_\_  
Complete Bank Name

\_\_\_\_\_  
Name at Bank to Contact

\_\_\_\_\_  
Bank Mailing Address

\_\_\_\_\_  
City State Zip Code

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

## Three Active Trade References

Name of Company \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Account # \_\_\_\_\_

Name of Company \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Account # \_\_\_\_\_

Name of Company \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Account # \_\_\_\_\_

Do you use purchase order numbers? \_\_\_\_\_

Name of person(s) placing order \_\_\_\_\_

Name of Bookkeeper \_\_\_\_\_

\_\_\_\_\_  
Authorized Dealer Signature

# Authorization for Release of Credit Information

The undersigned applicant has made application to Darrell Harp Enterprises, Inc. for a commercial credit line, and hereby authorizes:

1. Darrell Harp Enterprises, Inc. to obtain from any credit reporting agency any credit report relating to the undersigned which Darrell Harp Enterprises, Inc. may deem necessary for evaluating the commercial credit line requested by the undersigned.
2. Any bank or other lender or grantor of credit to provide Darrell Harp Enterprises, Inc. a copy of the applicant's most recent financial statement in its possession and information regarding the character, reputation, financial responsibility and indebtedness of the applicant as requested by Darrell Harp Enterprises, Inc. for the purpose of evaluating the commercial credit request of the applicant.

This Authorization shall continue to be valid during any such time period that credit is extended by Darrell Harp Enterprises, Inc. to applicant in order that Darrell Harp Enterprises, Inc. may protect its financial interests. The applicant hereby releases Darrell Harp Enterprises, Inc. and any bank or other lender or grantor of credit from any and all claims or causes of action that may arise or which he might have by reason of information furnished Darrell Harp Enterprises, Inc. by a credit reporting agency or by a bank or other lender or grantor of credit.

Company Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_