



Your Source to the Best Selling Lines

ADDRESS: 171 47th Street • Brooklyn, NY 11232

TEL: 718.499.6900 • FAX: 718.510.8784

Web: www.zreiss.com

Dealer Application (Website)

OFFICE USE ONLY

Approved by _____ Act. # _____ Payment method _____

1 COMPANY INFORMATION

START
HERE

Company Name _____

Address _____

City _____ State _____ Zip _____

Tax ID # _____

► BUSINESS TYPE

- Dealer
 Wholesaler
 Export
 Government
 Corporate
 Computers
 Consumer Electronics
 Photo Imaging
 Film & Batteries
 Appliances
 Other

2 CONTACT INFORMATION

► OWNER

First Name _____

Last Name _____

Phone _____

Fax _____

Email _____

@ _____

► BUYER

First Name _____

Last Name _____

Phone _____

Fax _____

Email _____

@ _____

► MANAGER

First Name _____

Last Name _____

Phone _____

Fax _____

Email _____

@ _____

3 ORGANIZATIONAL FORM

- Sole Proprietor
 Partnership
 Corporation

Incorporation Date _____ State of Incorporation _____

Has the firm or any principals ever been bankrupt? Yes No

If yes please explain _____

4 LOCATION/OPERATION

- Home
 Commercial Building
 Own
 Rent

Numbers of Employees _____ Years in Operation _____ Dunn & Bradstreet # _____

Annual Sales Volume: 1,000,000 - 5,000,000 5,000,000 - 10,000,000 Or \$ _____

over please →

⏪ continued

5 ▶ TRADE REFERENCES

Company Name _____
Address _____
City _____ State _____ Zip _____
Phone _____ Fax _____
Type of Business _____
Payment Terms _____

Company Name _____
Address _____
City _____ State _____ Zip _____
Phone _____ Fax _____
Type of Business _____
Payment Terms _____

Company Name _____
Address _____
City _____ State _____ Zip _____
Phone _____ Fax _____
Type of Business _____
Payment Terms _____

Company Name _____
Address _____
City _____ State _____ Zip _____
Phone _____ Fax _____
Type of Business _____
Payment Terms _____

6 ▶ BANK REFERENCES

Bank Name _____
Address _____
City _____ State _____ Zip _____
Type of Account _____
Account # _____
Contact Person _____
Phone _____ Fax _____

Bank Name _____
Address _____
City _____ State _____ Zip _____
Type of Account _____
Account # _____
Contact Person _____
Phone _____ Fax _____

👉 PLEASE ATTACH A COPY OF CERTIFICATE OF INCORPORATION , AND RESALE CERTIFICATE.

PLEASE INCLUDE YOUR RECENT FINANCIAL STATEMENT WITH THIS APPLICATION.

I hereby certify that all information presented on this application is correct to the best of my knowledge. My signature below constitutes an authorization for Zalmen Reiss & Associates Inc. ("REISS") to contact the above references and investigate my personal credit & financial records so that "REISS" may consider granting net terms privileges to us. As part of such investigation, I authorize "REISS" to request and obtain consumer credit reportson me in connection to opening , monitoring, renewal or extension of this and other accounts with "REISS". We believe our company is financially able to meet all of the commitments which we have made, and that we will make prompt payments. Should those terms now or at any future date include a service change for late payments or collection and attorney fees in the event of legal action, we agree to pay 1.5% per month on unpaid balances or max allowed by law which ever is less. In addition, my signature below signifies approval for my bank and creditors to respond to any credit inquiries about us.

Signed _____ Title _____ Date _____

PERSONAL GUARANTEE (BY OWNER)

By signing the application , I acknowledge that I have personally guaranteed the debts and obligations of my business and agree that I am personally obligated to perform all of the terms of and make all payments to (your company) required by, the agreement of which this application is a part.

Date _____ Signature _____ Name (print) _____

Home Address _____ Home Phone _____ SS# _____