



CUSTOMER APPLICATION FORM

Trade Business Name (DBA) _____

Business Legal Name _____

Business Telephone _____

Business Fax _____

Contact Person _____

Business Address _____
_____ For the past _____ years

City _____ State _____
_____ Zip _____

Shipping Address (If different of the listed above):

Address _____

City _____ State _____
_____ Zip _____

Type of Business _____
_____ For the past _____ years

Do You Have a Store Front Yes No
Approx. Sq. Footage? _____

What Brand(s) are you looking for? PRV
 STETSOM TIMPANO

Estimated Annual Purchase Volume per Brand:

PRV \$0 – \$5,000 \$5,000 - \$10,000
 \$10,000 - \$30,000 + \$30,000

STETSOM \$0 – \$5,000 \$5,000 - \$10,000
 \$10,000 - \$30,000 + \$30,000

TIMPANO \$0 – \$5,000 \$5,000 - \$10,000
 \$10,000 - \$30,000 + \$30,000

Federal Tax ID (USA) _____
How long in business _____

Resale Tax Certificate Number (Florida ONLY):

E-mail _____
Web address _____

Are you a dealer from a major manufacturer?
 Yes No If yes, please list them: _____

TERMS AND CONDITIONS

- Minimum Processing Order is \$500.00;
- Payment in advance by cash, check, wire transfer or company credit card;
- MAP Policy is strictly enforced. MAP Policy violations may result in account suspension for up to 30 days;
- Drop Shipments are not allowed;
- We do not break Master Carton to avoid shipping damages and minimize handling.

Date: _____

Signature: _____

PLEASE, SUBMIT FORM AND A COPY OF RESALE CERTIFICATE TO: support@btgsolutionsinc.com

WE WILL GET BACK TO YOU AS SOON AS POSSIBLE.

BTG Solutions Inc. 1893 SW 3rd St., Pompano Beach, FL 33069

Phone: +1(954) 859-5529 email: support@btgsolutionsinc.com www.btgsolutionsinc.com