



# Network Application Form

Legal Company Name: \_\_\_\_\_ Date Company Began: \_\_\_\_\_

Joining Network As:  Small Enterprise  OEM  Contractor  Architect

Type of Company:  Corporation  Partnership  Proprietorship

Mailing Address: \_\_\_\_\_ Shipping Address: \_\_\_\_\_

\_\_\_\_\_

General Email: \_\_\_\_\_ Shipping Address:  Business  Residential

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Mobile: ( ) \_\_\_\_\_ Website: \_\_\_\_\_

Owner(s) Name(s): \_\_\_\_\_ Email: \_\_\_\_\_

Key Personnel: \_\_\_\_\_ Email: \_\_\_\_\_

Key Personnel: \_\_\_\_\_ Email: \_\_\_\_\_

Geographical Market Coverage: \_\_\_\_\_

Surrounding Area:  25 Miles  50 Miles  100 Miles Other: \_\_\_\_\_

Current Screens Supplier: \_\_\_\_\_ Current Doors Supplier: \_\_\_\_\_

Do you have retail store front:  Yes  No # of square feet: \_\_\_\_\_

Do you have warehouse space:  Yes  No # of square feet: \_\_\_\_\_

What is your annual marketing budget: \_\_\_\_\_

Number of Employees: \_\_\_\_\_ Inside Sales: \_\_\_\_\_ Outside Sales: \_\_\_\_\_ Marketing: \_\_\_\_\_ Other: \_\_\_\_\_

BIN # (if applicable): \_\_\_\_\_ TAX ID # (if applicable): \_\_\_\_\_