

## DEALER APPLICATION

### Contact Information:

Full Legal Business Name: \_\_\_\_\_  
D/B/A Name (if different): \_\_\_\_\_  
Name of Primary Office Contact: \_\_\_\_\_ Title of Contact: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Business Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Business Web Site: \_\_\_\_\_

### Business Information:

State(s) in which the Business operates: \_\_\_\_\_ State(s) in which you deliver into: \_\_\_\_\_  
Federal Tax ID (FEIN): \_\_\_\_\_  
Name of Business Principal: \_\_\_\_\_  
Name of Business Principal: \_\_\_\_\_  
Name of Business Principal: \_\_\_\_\_  
Date Business was established: \_\_\_\_\_  
Are you a: (check as many that apply)  
 Builder – Retail     Builder – Sell Wholesale     Retail – Inventory Consigned     Retail – Inventory Owned  
What type/brand of building do you build/sell? \_\_\_\_\_  
Product Types:  Portable Bldg     Decks     Swing Sets     Carports     Playhouses     Gazebo     Livestock  
Annual Sales: \$ \_\_\_\_\_ Average Building Sale Price: \$ \_\_\_\_\_  
Number of Full-Time Employees: \_\_\_\_\_ Number of Part-Time Employees: \_\_\_\_\_  
Does Business have a full-time sales force? Y / N    If yes, how many sales employees? \_\_\_\_\_  
Other sales lot locations: \_\_\_\_\_  
Do you own or rent your lots? Circle one:    Own    Rent  
If you rent:  
Landlord name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Landlord name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Landlord name: \_\_\_\_\_ Phone: \_\_\_\_\_  
(Continue on separate page if necessary.)  
Has Business offered Rent-to-Own before? Y / N    If yes, who? \_\_\_\_\_  
Does Business offer financing? Y / N  
How did Business hear about BLI? \_\_\_\_\_  
How does Business expect BLI to help? \_\_\_\_\_

**Trade References:**

Business name: \_\_\_\_\_ Type of relationship (describe): \_\_\_\_\_  
Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
\$ Annual purchases (if applicable): \_\_\_\_\_

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Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
\$ Annual purchases (if applicable): \_\_\_\_\_

**Supplemental Information:**

Please provide at least ONE of the following documents:

- A copy of the most recent annual financial statement for the Business (balance sheet and income statement).
- A copy of the Business' most recent tax return (or Schedule C from personal return if sole proprietor).

Please also provide:

- Company literature, such as brochures or product price lists

**Consent to obtain a copy of your personal credit report:**

Principal's Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Home Street Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- Provide a copy of photo identification listing the same name, address, and DOB as listed above.

Principal's Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Home Street Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- Provide a copy of photo identification listing the same name, address, and DOB as listed above.

By signing below, I certify the information provided is true and correct, and I understand screening and background checks may be performed to determine whether the Business will be accepted and approved as a BLI Dealer. **If approved, a Dealer Agreement will be forth coming.**

\_\_\_\_\_  
Signature of Business Owner or Authorized Executive

\_\_\_\_\_  
Title

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date