

Dealer Application

Company Information

Company Name:			
Address:	Street Address:		
	City:	State:	Zip:
Country:			
Phone Number:		Fax Number:	
E-Mail Address:			
Website:			
Years In Business:			
Years In Business Under Present Name:			
Number Years At Present Location:			
Total Number Of Locations:			
Dollar Amount Of Liability Insurance:			
Type Of Ownership (Sole Proprietorship, Partnership, Corporation, LLC):			
Prior Year Gross Sales For All Products:			
Prior Year Gross Sales For Electronic Message Centers Only:			

Key Contacts

President / Owner(s):	
Sales / Marketing Manager:	
Financial Manager:	
Production Manager:	
Installation Manager:	
Service Manager:	

Fabrication, Installation and Service Capabilities

Number Of Fabrication Personnel:	
Number Of Installers:	
Number & Type Of Installation Vehicles:	
Number Of Service Personnel:	
Number & Type Of Service Vehicles:	
Number Of Project Managers:	
Installation/Service Hourly Rate	
Internal Art Department (Yes/No):	
After Hours/Weekend Service (Yes/No):	

Market / Product Information

Market Focus:	
Geographic Region Served:	
Years Of LED Display Experience:	
Current LED Display Suppliers:	

Please fax this application to: 626-369-7858