

# Dealer Application

C and C Synthetics would like to thank you for your interest in the best lubricants. Please completely fill out the form below and return it to us for dealer consideration.

## Business Organization Type:

Corporation  Partnership  Franchise  Sole Proprietorship

## Business Type:

Paintball Store  Paintball Field  Sporting Goods  AirSoft  Firearms

Other:

Online  Retail

## Business Information:

Company Name: \_\_\_\_\_ Date Established: \_\_\_/\_\_\_/\_\_\_

Registered Business Name: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Country: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_

Business Email: \_\_\_\_\_

Website: \_\_\_\_\_

Referred By: \_\_\_\_\_

Business Shipping Address: \_\_\_\_\_

ATTN: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Country: \_\_\_\_\_

## Accounting Information

Accounts Payable Contact: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

## Please Attach Photocopies of All The Following Documents:

- 1) Resale license or business license
- 2) Tax ID certificate
- 3) Voided check with business name

## Preferred Method of Payment:

Credit Card  PayPal  Check

\_\_\_\_\_  
Signature of Owner Signature of Partner(s) (if applicable)

Please Fax or mail the completed application and all required documents to:

C and C Synthetics

ATTN: Dealer Application

21268 Emile Strain Road

Mandeville, LA 70471

Fax: (985) 809-7660