



2147 Gees Mill Rd. Conyers, GA 30013 USA
 Phone: 800-883-8838 Fax: 770-388-0246
 Email: wholesale@atlantacutlery.com



Authorized Dealer Application

Legal Name of Business: _____

Trade Names of Businesses which will be used for selling of our Products:

Complete Billing Address: _____

Shipping Address if different from above (No P.O. Boxes; must be a physical address):

Would you like to drop ship orders to your customers? Yes _____ No _____

**If YES, note that there is a \$5.00 per order fee for this service.*

UPS/Fedex Account number for 3rd Party Shipping: _____

Email Address: _____

Phone #: _____ Fax #: _____

Alternate Phone #: _____

Attach a Copy of your Current Business License. *** Photocopy of certificate MUST accompany this form.**
 If you wish to be Sales Tax Exempt, please complete a copy of the Sales Tax Exempt Certificate and return with a copy of your Sales Tax Certificate from your state.

Please explain how you plan to market our product?

How did you hear about us? _____

Payment Type:
 Credit Card (no check/debit cards) _____ Check (drawn in US funds from a US bank) _____

One time processing fee (\$30.00). Provide check with application or credit card details

C.C.# _____ Exp. _____ CV# _____ Card (VI, MC, AX, DIS) _____

I acknowledge that the above information is true and correct to the best of my ability. I agree to the terms and conditions set forth by Atlanta Cutlery Corp. and its subsidiaries.

Please Print Name: _____

Signature: _____ Title: _____ Date: _____