

# Distributor Application

# AmeriMation

9 E College Dr, Arlington Heights, IL 60004 TEL (847) 388-7189 FAX (847) 388-7194

Please complete the form and submit it via email or fax.  
If email, [service@amerimation.net](mailto:service@amerimation.net) If fax, (847) 388-7194

## COMPANY INFORMATION

Company name			
Street address			
City	State	Zip code	
Phone number	Fax number		
Email address	Company website		

\* Please submit a copy of resale certification if you are purchasing from Illinois.

## COMPANY PROFILE

Please list product lines sold separately or attach your line card w/fax or email

Yearly sales volume			
Main product line			
Main industries you sell into			
Number of Employees		Number of Salespeople	

## CONTACT INFORMATION

	Name	Email	Phone number
Authorized Personnel			
Sales Manager			
Inside Sales Manager			
Purchasing Manager			
Accounts Payable			

## SHIPPING INSTRUCTIONS

Street address			
City	State	Zip code	
Ship via	UPS Collect #		Pre-paid
	Other		

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## CREDIT REFERENCE 1

If you have a reference list, please attach it to email or fax

Company name			
Contact name			
Street address			
City	State	Zip code	
Phone number	E-mail		

## CREDIT REFERENCE 2

Company name			
Contact name			
Street address			
City	State	Zip code	
Phone number	E-mail		

## CREDIT REFERENCE 3

Company name			
Contact name			
Street address			
City	State	Zip code	
Phone number	E-mail		