ALUMA NEW DEALER APPLICATION

It's fast & easy to become an Aluma dealer, here's how:

- Completely fill out the application below.
- Mail to: Kaye Corporation, 1910 Lookout Drive, North Mankato, MN 56003 Or Fax to: (800) 625-3696
- Or Email to: andy.smith@alumaklm.com

All of us at Aluma welcome you aboard You will be contacted by your Aluma sa			All information is confidential.
rou will be contacted by your Aluma sa	ies rep in a couple of da	ys.	
Dealer Name:	Federal ID #:		
Mailing Address:	County:		
Shipping Address:	County:		
City, State:	ZIPPhon	ne:	_Fax
Email:			
Years in Business:Partnership:	Corporation:	Proprietorship:	
Officer or Owner	-		
	Home Phone:		
	Spouse's Name:		
	Shop Labor Rate:\$		
Bank Reference:		•	
Account #Co			
Product lines you are interested in:			
List all suppliers with whom you do bus	iness:		
Company Name:		Phone:	Fay:
Company Name:			
Company Name:			
Company Name.	Account	1 none	I dA
The information provided on this applic vendor to obtain necessary credit inforr agrees to pay all invoices according to t overdue. If collection of account by an o remit all fees.	mation at any time from erms stated thereon. A	any source on any or all 1.5% late fee per month w	of the parties listed. Applicant will be charged on any amounts
Signature: X	Title:		Date:
Blanket Certificate of Resale: This is to certify that all material, merchandise or goods purchased by the undersigned from Aluma, 101 East Seneca, Bancroft, IA 50517, after (date)is purchased for the resale as tangible personal property. This certificate shall be considered a part of each order we shall give. This certificate shall remain in force until revoked. Signature:X			
Signature:X	Title:_		Date:
Certificate #:			
	<u>Individual Person</u>		
l,	, residing at		for and in consideration of
your extending credit at my request to_	, residing at		
"Company"), of which I am	ation of the Company are by the Company when a continuing and irrevoo of default, non-paymen	nd I nereby agree to bind ever the Company shall fa cable guaranty and inden	myseir to pay you on demand ail to pay the same. It is nnity for such indebtedness of
Witness	•	Signature:Y	
Address:	Signature:X Officer / Owner		