



## New Dealer Application

If you are interested in becoming a dealer with SweepsUSA, please complete this form in its entirety and return it to us by mail or fax. All forms must be signed and dated by the person applying.

### DEALER INFORMATION

Legal Name of Dealer .....

Street Address .....

City ..... State ..... Zip .....

Telephone ..... Fax .....

E-mail .....

Legal Entity Type:     Sole Proprietor             Partnership             Corporation

### OWNERSHIP

Name ..... Title .....

Home Address .....

City ..... State ..... Zip .....

Telephone ..... E-mail .....

Name ..... Title .....

Home Address .....

City ..... State ..... Zip .....

Telephone ..... E-mail .....

### METHOD OF PAYMENT

Cash             Personal Check             Business Check             Certified Check

Creditcard

I hereby authorize SweepsUSA to charge my credit card # .....

Exp. .... CCID# ..... with the total charge for all purchases in the name of this account.

Signature ..... Date .....