



# SAWTOOTH OUTDOOR P R O D U C T S

**DEALER/CREDIT APPLICATION:**  
email to gm@sawtoothoutdoorproducts.com

Sawtooth Outdoor Products  
11464 Willamette Way Caldwell, Idaho 83605

Company Name: \_\_\_\_\_ Operating Hours: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ Store Size: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_ Shooting Lanes: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Year Established: \_\_\_\_\_  
Fax Number: \_\_\_\_\_ State Business License #: \_\_\_\_\_  
Email: \_\_\_\_\_ State Resale Tax #: \_\_\_\_\_  
Type of Ownership:    Corporation    Partnership    Sole Proprietorship

Owner or Principle: \_\_\_\_\_ Owner or Principle: \_\_\_\_\_  
Home Address: \_\_\_\_\_ Home Address: \_\_\_\_\_  
City: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Cell Phone#: \_\_\_\_\_ Cell Phone#: \_\_\_\_\_  
Payables Contact: \_\_\_\_\_ Store Purchaser: \_\_\_\_\_  
Type of Account Requested:    C.O.D    Open Account    Visa/MasterCard    Other: \_\_\_\_\_  
If approved:    Bulk packaging    Single Packaging with UPC codes

### BANK INFORMATION

Bank Name \_\_\_\_\_ Acct# \_\_\_\_\_  
Address \_\_\_\_\_  
Contact: \_\_\_\_\_

### SPORTING GOODS TRADE REFERENCES

Company Name	City	State	Fax Number
1) _____	_____	_____	_____
2) _____	_____	_____	_____
3) _____	_____	_____	_____
4) _____	_____	_____	_____

PSE rep (if applicable): \_\_\_\_\_

How did you hear about Sawtooth Outdoor Products?

Magazine    Salesman    Manufacturer    Dealer Show    Facebook    Google Search    Other

Details on above: \_\_\_\_\_

### GUARANTEE OF PAYMENT

The undersigned agrees to pay full amount of all invoices according to the terms stated on each invoice for goods and or services provided. In the event the account becomes past due the undersigned agrees to pay a 2% per month finance charge on the outstanding past due balance until all past due amounts are paid in full. Undersigned also agrees to pay all costs of collection including fees incurred by collection agencies and all legal fees including attorney's fees if legal proceedings are instituted. Typing below constitutes an electronic signature.

Principle's or Owner's signature: \_\_\_\_\_ Date: \_\_\_\_\_