



PBRack Clothing Dealer Application

Business Name:

Website:

Name of Owner:

Email:

Phone #:

Shipping Address:

City, State, Zip:

Country:

Federal Tax #:

State Resale #:

Date Business Opened:

Business Type: Proprietorship Partnership Corporation

Number of Locations:

Is this a store front location:

Is there an on site field:

Is this solely an internet business?

Signature -

Date-

Print Name –

Scan and e-mail the signed document to pbrack@pbrack.com or simply send us the required information in a list and send as an e-mail.