

DEALER APPLICATION

4512 Anderson Road | Knoxville, TN 37918

ph: 888.376.7027 | fax: 865.246.2007

info@bluediamondattachments.com | www.bluediamondattachments.com



Company Name: _____

Contact Name: _____ Email: _____

Address: _____ Phone: _____

City | State | Zip Code: _____ Fax: _____

Years in Business: _____ Fed Tax ID/SSN: _____ Resales ID: _____

Tax Exempt? yes no | (IF yes, please fax Tax Exempt Certificate with application)

Invoicing/Billing Email: _____

What new equipment lines do you currently sell? _____

Do you sell used equipment only? yes no

What is your company's website? _____

What attachment lines do you currently sell? _____

How did you hear about Blue Diamond®? _____

How many Sales Representatives do you have employed? _____

How many locations do you have currently? _____

Application completed by: _____

PRINT NAME

SIGNATURE

DATE

**PLEASE FILL OUT COMPLETELY AND FAX TO (865) 246-2007
OR EMAIL DEALERSUPPORT@BDATTACHMENTS.COM**

Please include the following:

Copy of business license

State Sales Tax Exempt Form

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Credit Application or Credit Card
Authorization Form