



PRIME CONVEYOR, INC.

DISTRIBUTOR APPLICATION

COMPANY NAME: _____

ADDRESS: _____

TELEPHONE: _____

FAX: _____

EMAIL: _____

WEB-SITE: _____

ADMINISTRATIVE CONTACT PERSON: _____

BANK REFERENCE: _____

CREDIT REFERENCES:

1. _____

2. _____

3. _____

ABOUT THE COMPANY:

YEARS IN BUSINESS: _____

ANNUAL SALES: _____

PRODUCT LINES SOLD: _____

SALES PERSONNEL: _____

ENGINEERING PERSONNEL: _____
