



100 AIRPARK DRIVE, ROCHESTER, NEW YORK 14624

Confidential Dealer Application and Sales Agreement (CDASA)

Business Information

Full Legal Name of Business:		Tax ID Number (FEIN):	
Address:			
City:	State:	Zip:	Phone:
Business Website:			
Business Contact Email:		AP Contact Email:	
In Business Since:	# of Full Time Employees:	Ever Declared Bankruptcy? Check One: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Legal Form Under Which Business Operates: LLC: <input type="checkbox"/> Corporation: <input type="checkbox"/> Partnership: <input type="checkbox"/> Proprietorship: <input type="checkbox"/>			
Account Type: Open: <input type="checkbox"/>		Credit Card/ ACH / Fax Check: <input type="checkbox"/>	
Name of D/B/A if Applicable:		Annual Company Sales:	
Credit Limit Requested (if applicable):		AmChar Wholesale Contact Person:	
Payment Terms Requested:		FFL #:	
Estimated Monthly Purchases with AmChar Wholesale:		FFL Expiration Date:	

Business Owner/Officer Information (Required Section)

Name of Owner:		Title:		SSN:	
Address:					
City:	State:	Zip:	Phone:		
Name of Additional Owner:		Title:		SSN:	
Address:					
City:	State:	Zip:	Phone:		
Name of Additional Owner:		Title:		SSN:	
Address:					
City:	State:	Zip:	Phone:		



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Bank References (If applying for Open Credit Terms)

Institution Name:		Institution Name:		Institution Name:	
Contact Person:		Contact Person:		Contact Person:	
Address:		Address:		Address:	
City:		City:		City:	
State:	Zip:	State:	Zip:	State:	Zip:
Phone:		Phone:		Phone:	
Fax:		Fax:		Fax:	

Trade References

(Gun Distributors/Manufacturers Only, if applying for Open Credit Terms)

Company Name:		Company Name:		Company Name:	
Contact Person:		Contact Person:		Contact Person:	
Address:		Address:		Address:	
City:		City:		City:	
State:	Zip:	State:	Zip:	State:	Zip:
Phone:		Phone:		Phone:	
Relationship Since:		Relationship Since:		Relationship Since:	
Fax:		Fax:		Fax:	
Credit Limit:		Credit Limit:		Credit Limit:	
Current Balance:		Current Balance:		Current Balance:	



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I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in this CDASA to release necessary information for the business for which credit is being applied for in order to verify the information contained herein.

I further understood and expressly agree that any and all sales and transactions with the business named herein which occur after approval of this CDASA are subject to the provisions of the Terms and Conditions of Sale of AmChar Wholesale, Inc. as set forth therein, a copy of which I acknowledge has been provided me or which accompanies this CDASA. I acknowledge a copy is also available to the business and myself at any time upon request and such that Terms and Conditions of Sale are specifically incorporated in full into this CDASA by this reference. I and the business for which this CDASA is being submitted agree to be bound thereby as if it and I had directly executed and consented to the same. AmChar Wholesale, Inc. shall be entitled to rely upon the acceptance of such Terms and Conditions of Sale in connection with any sale made by hereafter.

I hereby execute this CDASA on behalf of the above-named business and personally guarantee, and agree to be personally liable for failure of the performance by the business named herein, of any and all of its obligations to AmChar Wholesale, Inc., including timely payment of any and all sums due AmChar Wholesale, Inc. This personal guarantee will specifically apply in the event that the business for which credit is being applied for declares bankruptcy or files for bankruptcy protection.

I and my business hereby agree to each and all of the foregoing by signing and submitting the Confidential Dealer Application and Sales Agreement (CDASA)

By _____

Title _____

I have read and agree with the Terms and Conditions of Sale with AmChar Wholesale, Inc.

Signature _____

Date _____

Personally and Individually - Sign Here

APPLICATION CHECKLIST:

In order for your application to be processed in a timely fashion, please provide the following back to AmChar Wholesale, Inc. Documents that must be included:

- 1) Pages 1 thru 3
- 2) Completely filled application with all authorized signatures
- 3) Current/Valid State Business Resale Certificate
- 4) FFL or applicable document if purchasing firearms