

**RESELLER INTEREST FORM**

Legal Company Name: \_\_\_\_\_

Other DBA: \_\_\_\_\_

**Company Address**

Headquarters Address: \_\_\_\_\_

Country: \_\_\_\_\_

Website: \_\_\_\_\_

Main Company Phone: \_\_\_\_\_

Main Company Fax: \_\_\_\_\_

Entity Type (check one)  Sole Proprietor  Partnership  Corporation

Federal Tax ID Number: \_\_\_\_\_

States with Resale Certificates: \_\_\_\_\_

Business Owner Name: \_\_\_\_\_

Business Owner Name: \_\_\_\_\_

Business Owner Name: \_\_\_\_\_

Business Owner Name: \_\_\_\_\_

Additional Business Locations: \_\_\_\_\_

Sales Territory: \_\_\_\_\_

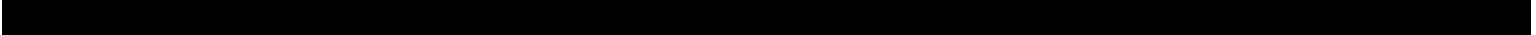
Number of Outside Sales Reps: \_\_\_\_\_

Number of Inside Sales Reps: \_\_\_\_\_

**Contact Information**

Sales Manager: Name: \_\_\_\_\_ Phone: \_\_\_\_\_ eMail: \_\_\_\_\_

Accounts Receivable: Name: \_\_\_\_\_ Phone: \_\_\_\_\_ eMail: \_\_\_\_\_



**FOR QUESTIONS, BID PRICING & QUANTITY DISCOUNTS CONTACT:**  
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