



Please check all applicable items below:

New Application

Updated Application

We intend to resell

INDUSTRIAL & COMMERCIAL APPLICATION



Company Name:		DBA:
Business Mailing Address:		Business City:
Business State:	Business Zip:	Business Country:
Business Telephone:		Business Fax:
Shipping Address (if different):		Shipping City:
Shipping State:	Shipping Zip:	Shipping Country:
Shipping Telephone:		Shipping Fax:
Website Address:		
President/Owner First Name:		President Last Name:
President Phone:		President Email:
Sales Manager First Name:		Sales Mgr. Last Name:
Sales Mgr. Phone:		Sales Mgr. Email:
Purchasing Manager First Name:		Purchasing Mgr. Last Name:
Purchasing Mgr. Phone:		Purchasing Mgr. Email:
Primary Line of Business:		
Number of Locations:	Years in Business:	Do you Have a Showroom?:





TURTLE PLASTICS™
THE RECYCLED PRODUCTS COMPANY

**INDUSTRIAL & COMMERCIAL
APPLICATION**



Controller/CFO First Name:		Controller/CFO Last Name:	
Controller/CFO Phone:		Controller/CFO Email:	
Annual Company Gross Sales (in \$):	Corporation Type:	EIN:	
Amount of Credit Request:	Has the Company Ever Filed for Bankruptcy or is the Company in Process of Reorganization?:		
Name of Bank/Institution 1:		Bank/Institution 1 Contact Name:	
Bank/Institution 1 Contact Email or Phone:		Bank/Institution 1 Account Number:	
Name of Bank/Institution 2:		Bank/Institution 2 Contact Name:	
Bank/Institution 2 Contact Email or Phone:		Bank/Institution 2 Account Number:	
Trade Reference 1 Company:		Account Number with Trade Reference 1:	
Trade Reference 1 Contact Name:		Trade Reference 1 Contact Email or Phone:	
Trade Reference 2 Company:		Account Number with Trade Reference 2:	
Trade Reference 2 Contact Name:		Trade Reference 2 Contact Email or Phone:	
Trade Reference 3 Company:		Account Number with Trade Reference 3:	
Trade Reference 3 Contact Name:		Trade Reference 3 Contact Email or Phone:	



INDUSTRIAL AND COMMERCIAL APPLICATION



Number of inside sales people:	Number of outside sales people:
Do you have Scheduled Sales Meetings?:	May we visit and provide product training to sales force?:
At which trade shows do you exhibit?:	Do you publish a catalog?:
Do you manufacture any equipment?:	If so, please list:
Are you familiar with Turtle Plastics' Cribbing & Stabilization Tools?:	Do you sell outside of the USA?
Are you familiar with Turtle Tiles?	What countries do you primarily sell too?
Do you sell into California or Europe?	Do you have your own distribution transport?
Please specify what other matting products you sell:	
Other:	

Name:	Signature:
Title:	Date:

Agreement

- 1 . Applicant will receive notification regarding application approval within 7-10 business days of receiving fully completed and signed application. Please note if you are a reseller, additional documents will be required (Distributor Agreement, Prop65 Form and State Sale Tax Unit Form.
2. Once approved, all invoices are to be paid 30 days from the date of the invoice.
3. As an authorized user of our products, your Company agrees not to modify or alter any Turtle Plastics products without the specific written consent of Turtle Plastics.
4. By submitting this application, you are acknowledging that you are an authorized representative/agent of the Company and you authorize Turtle Plastics to make inquiries into the banking and business/trade references that you have supplied.

*** PLEASE RETURN THIS SIGNED APPLICATION WHEN COMPLETED TO ORDERS@TURTLEPLASTICS.COM***

IF YOU ARE RESELLING OUR PRODUCTS, ALSO ATTACH A SIGNED DISTRIBUTOR AGREEMENT, PROP65 FORM AND USE TAX UNIT EXEMPTION FORM WITH THIS APPLICATION.