

# TACK DEALER APPLICATION

**Saddle Barn, Inc. 1102 N. Garden \* P.O. Drawer 2465  
Roswell, New Mexico 88201**

**1-520-682-5481 \* Fax (575) 622-0663 \* E-MAIL isaac@saddlebarn.com**

**IMPORTANT!** This application must be filled out completely and signed by the Dealer before purchasing from SADDLE BARN, INC.

Business Name \_\_\_\_\_ Number of Employees \_\_\_\_\_

Owner's Name \_\_\_\_\_ Social Security # \_\_\_\_\_

**FEDERAL ID NUMBER** (required) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Shipping Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone # (\_\_\_\_) \_\_\_\_\_ Fax # (\_\_\_\_) \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Website Address \_\_\_\_\_

Have you ever purchased from Saddle Barn, Inc. before?  Yes  No

Business is:  Store Front  Tack Trailer  other \_\_\_\_\_

Nature of your business \_\_\_\_\_

Years in business at this location \_\_\_\_\_ At a previous location  Yes  No

## **BANKING INFORMATION (REQUIRED)**

Bank Name: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone# \_\_\_\_\_

Checking Account #: \_\_\_\_\_ Saving Acct # \_\_\_\_\_

Checking Account #: \_\_\_\_\_ Saving Acct # \_\_\_\_\_

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Status Requested (Please Check One)

- UPS C.O.D. company checks accepted or money orders.  
 VISA/MASTERCARD, DISCOVER OR AMERICAN EXPRESS  
 NET 30 DAYS (please complete credit history and sign)

Amount of Credit Desired \_\_\_\_\_

Name that appears on your Payment Checks \_\_\_\_\_

Business Name \_\_\_\_\_

PLEASE LIST SUPPLIERS THAT YOU PURCHASE MERCHANDISE FROM ON A REGULAR BASIS WITH THE TERMS YOU HAVE REQUESTED.

## TRADE REFERENCE #1

Business Name \_\_\_\_\_

Account # \_\_\_\_\_ Terms \_\_\_\_\_ Credit Limit \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

Phone# \_\_\_\_\_ Fax # \_\_\_\_\_ Contact \_\_\_\_\_

## TRADE REFERENCE #2

Business Name \_\_\_\_\_

Account # \_\_\_\_\_ Terms \_\_\_\_\_ Credit Limit \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

Phone# \_\_\_\_\_ Fax # \_\_\_\_\_ Contact \_\_\_\_\_

## TRADE REFERENCE #3

Business Name \_\_\_\_\_

Account # \_\_\_\_\_ Terms \_\_\_\_\_ Credit Limit \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

Phone# \_\_\_\_\_ Fax # \_\_\_\_\_ Contact \_\_\_\_\_

**Applicant's signature attests financial responsibility and willingness to pay our invoices in accordance with our terms and agrees that any invoices not paid within terms will be subject to finance charges which are due and payable. Applicant also agrees to pay reasonable attorney fees in the event of legal referral for collection of unpaid balances.** To assist in our credit approval of applicant, Saddle Barn, Inc. may contact the above trade references who are authorized to release credit and financial information to us. To insure prompt processing, please complete this Application in its entirety.

This agreement shall be governed and interpreted in accordance with the laws of the State of New Mexico. For the purpose of resolving any issue pertaining to conflict of laws or otherwise, this Agreement shall be fully and solely executed, performed and/or observed in the State of NM. The parties hereto also expressly consent to personal jurisdiction in the State of NM in action or proceeding brought in any court therein, state or federal, arising from, or alleging facts arising from, any transaction between the parties pursuant to this Agreement.

Dealer' signature \_\_\_\_\_ Date \_\_\_\_\_