PUTNAM Prints
DIGITAL PRINTING

New Dealer Application

This application needs to be submitted and approved before your first order is placed.

Date_____/_____/_____

Company Name:_____

Type of Company (circle one) : Storefront Online Retailer Home Dealer

Tax ID #_____ Years in Business_____

Bill to Address:

_____

_____

_____

_____

Ship to Address:

_____

_____

_____

_____

Phone: _____ Fax:_____

Email (Required - this will be your username):_____

Password (6-10 letters - all lowercase):_____

Website:_____

Owner's Name:_____

Who is in charge of your Accounts Payable?_____

Accounts Payable Phone #_____

Who is your buyer?_____

Since all orders are customized, credit cards are charged at time of order shipment.

Credit Card (circle one) : VISA MasterCard AMEX

Account #: _____-_____-_____-_____ Exp. Date: _____ /_____

Security Code on Back of card:_____

I hereby authorize Putnam House to charge the above credit card account for all orders placed by my company.

Signed: _____ Title: _____

Date: _____

Please email the completed form to info@putnamhouse.net