

RESELLER APPLICATION FORM



FOOD MACHINERY, INC.

3131 S. CANAL STREET, CHICAGO, IL 60616

TEL: 773.376.0800 FAX: 773.376.2010 TOLL FREE: 800.836.5756

WEB: www.americaneaglemachine.com E-MAIL: sales@ameagle.biz

Instructions: Please fill out this form and attach a copy of your resale tax permit and/or license with your application. This is not a credit application form. To apply for credit, please fill out our separate credit application form.

DATE: _____

COMPANY NAME: _____ CONTACT: _____

ADDRESS: _____ CITY: _____

STATE/PROV: _____ ZIP/P.C.: _____

TEL: _____ FAX: _____ EMAIL: _____

WEBSITE: _____

1. How did you hear about AMERICAN EAGLE?

A. Business associate: _____ Internet: _____

Trade Show: _____ Other: _____

2. What products do you:

| | Sell | or | Service | Brands |
|---------------------|-------|----|---------|--------|
| A. Planetary Mixers | _____ | | _____ | _____ |
| B. Spiral Mixers | _____ | | _____ | _____ |
| C. Meat Processors | _____ | | _____ | _____ |
| D. Dough Processors | _____ | | _____ | _____ |
| E. Slicers | _____ | | _____ | _____ |

3. To whom do you sell: Restaurant _____ Supermarkets _____ Government _____

Institutions _____ Bakery _____ Other _____

4. How do you promote your products or services?

Internal Sales Reps _____ Number _____ External Sales Reps _____ Number _____ Branch Offices _____

Via catalog, advertising, web, etc. (list online/print): _____

List types of product literature used by your salesforce: _____

Please list any kinds of promotional, rebate, or marketing support requested: _____

5. What trade publications do you read? _____

6. What trade shows do you attend? _____



FOOD MACHINERY, INC.

3131 SOUTH CANAL STREET, CHICAGO, IL 60616

TEL: 773.376.0800 FAX: 773.376.2010 TOLL-FREE: 800.836.5756 EMAIL: sales@ameagle.biz

TRADE REFERENCE INFORMATION

DATE:

TO: AMERICAN EAGLE FOOD MACHINERY: For the purpose of establishing an account and obtaining merchandise from you the following statement in writing is made intending that you should rely on same as correct.

NAME OF BUSINESS _____ DBA: _____

TYPE OF BUSINESS: PROPRIETORSHIP () PARTNERSHIP () CORPORATION ()

ADDRESS _____
STREET CITY STATE ZIP CODE

PHONE NUMBER _____ CONTACT PERSON _____

FAX NUMBER _____ RESALE TAX PERMIT NUMBER _____

EMAIL ADDRESS _____ LINE OF BUSINESS _____

AT PRESENT LOCATION SINCE (DATE) _____ PROPERTY OWN LEASE BY COMPANY PRINCIPALS

UNDER PRESENT OWNERSHIP SINCE _____ AREA SERVED _____

FEDERAL TAX ID _____

TRADE REFERENCES

PLEASE PROVIDE: COMPANY NAME / CONTACT PERSON / TITLE / E-MAIL / PHONE / COMPLETE ADDRESS

- 1.) _____
- 2.) _____
- 3.) _____
- 4.) _____
- 5.) _____

We give authorization to our trade references to provide general information on our company and historical trading experiences.

SIGNED DATE

PRINTED NAME TITLE