



149 S. Broad Street  
Grove City, PA 16127  
T. (724) 870-4250  
F. (724) 264-4174

# *Interested in Becoming a Distributor?*

All information will be treated as confidential and used solely by DuraEdge. Please complete the questionnaire and submit with an authorized signature. All questions must be answered. If any question arise, feel free to contact DuraEdge.

## **DuraEdge Distributor Application Form**

<b>Company Name:</b>	
<b>Mailing Address:</b>	
<b>Contact Person:</b>	
<b>Company President:</b>	
<b>Fax Number:</b>	
<b>Phone Number:</b>	
<b>Email Address:</b>	
<b>Website:</b>	

<b>Company Type:</b>
<b>Products and Services Offered:</b>
<b>Number of Years in Business:</b>
<b>Regions of Sales &amp; Services:</b>
<b>Number of Sales Reps:</b>

[www.duraedge.com](http://www.duraedge.com)



**Currently a Distributor/Dealer of which products:**

Product	Company	Reference Person	Phone
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____

Completed by: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

**Send to our Distribution Network Manager:**

David Szubski  
dszubski@duraedge.com