



Maxtrend Corporation

4037 Clipper Court, Fremont CA 94538

Tel: 510-438-0226, Fax: 510-438-0809

Website: <http://www.maxtrendusa.com/> Email: sales@maxtrendusa.com

APPLICATION FOR WHOLESALE ACCOUNT

Business Information

Name of Business _____
Type of Business _____
Name of Owner(s) _____
Business Address _____
City _____ State _____ Zip _____
Phone # _____ Fax # _____ Email _____

Contact Information

Primary Contact _____ Position _____
Phone # _____ Fax # _____ Email _____
Alternate Contact _____ Position _____
Phone # _____ Fax # _____ Email _____
Persons Authorized to submit order _____

Shipping Information

Ship to Name: _____
Shipping Address _____
City _____ State _____ Zip _____

Billing Information

Primary Card: ___ Visa ___ Master Card, **Name as appears on Card** _____
Credit Card # _____ Expiration Date _____
Card Verification Value (CVV) Code _____

Alternate Card: ___ Visa ___ Master Card, **Name as appears on Card** _____
Credit Card # _____ Expiration Date _____
Card Verification Value (CVV) Code _____

Other Billing Options (Please indicate if this will be your primary method of payment)

Personal Check ___ Processed immediately, expect an average one to two weeks turn around.
Company Check ___ Processed immediately, expect an average one to two weeks turn around.
Money Order ___ Processed immediately, expect an average one to two weeks turn around.
Cashiers Check ___ Processed immediately, expect an average one to two weeks turn around.
Wire Tranfer ___ Only on orders over \$10,000

Name of Preparer _____ Signature _____ Date _____

Please enclose a copy of business license and resale permit in addition to this form.