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DEALER APPLICATION

Company Information

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Federal Tax ID: _____

Showroom

Do you have a showroom: Yes No

Showroom Address: _____

Website

Website URL: _____

Is this an E-commerce site? Yes No

Sales/Purchasing Contact Information

Name: _____

Phone: _____ Email: _____

Accounting Contact Information

Name: _____

Phone: _____ Email: _____

Authorized Representative

Name: _____ Signature: _____

Title: _____ Date: _____